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Gynecology.

A RARE HYSTERECTOMY.

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Supra-vaginal hysterectomy for fibro-myoma with the complication of pregnacy is so rare a performance that Pozzi, Medical and Surgical Gynecology, 1891, records but seventeen reported cases gleaned from the entire literature of the profession. Of these sixteen are of foreign origin, and one case, reported by Ethridge, Chicago, in the *American Journal of Obstetrics*, 1887, Vol. 20, p. 69, is from the United States. This case was that of a fibro-cystic tumor with concealed pregnancy at three months, the patient dying on the eleventh day from peritonitis. The first case recorded by Pozzi is by Robt. Barnes, England, in 1874. Of the seventeen there are eleven recoveries and six fatalities. Since the issuance of Pozzi's work three additional cases have been reported in the United States, one by Dr. B. F. Baer, in the *New York Journal of Gynecology* for 1893, Vol. 3, pp. 795-809; another by Dr. T. A. Reamy, in the *Annals of Gynecology*, Philadelphia, for 1893-94, Vol. 7, p. 152, and the third by Prof. Jas. C. Wood, Cleveland, in Wood's *Text-Book of Gynecology*, 1894, p. 610. Dr. Wood's case was an unusual one, the tumor weighing twenty-four pounds, the patient dying of shock thirteen hours after the operation, which was made November 15, 1893. In Dr. Reamy's case the tumor was sub-peritoneal, and myomectomy was first performed, the uterus being subsequently sacrificed to the necessities of the case. This case recovered. The result in Dr. Baer's case is not known to me. So thus far the profession of the United States has contributed four reported cases, with two fatalities, one recovery, and result of one unknown to the writer. From this it will be seen that the condition is accounted an exceedingly rare one, and this fact prompts me to report a case which occurred in my practice on the 19th of February of the present year.

Mrs. J., Swede, laboring woman, age 35, general health good, applied at Prof. Taft's clinic at the Hering Medical College Dispensary for examination and treatment because of severe pain in the left pelvic region, with a general sense of weight and heaviness, and consequent discomfort, throughout the lower abdomen and pelvis. Her menstruation began at fourteen years of age and continued uninterruptedly and without unusual features up to November, 1893, when it suddenly ceased. She married at thirty-three and had lived a married life spasmodically from that time till within two months. She had never been pregnant to her knowledge, and with the single exception of the sudden estoppel of the menstrual flow there were now no suggestions of this condition. This special fact, of course, prompted inquiry in this direction, but I was not impressed with the thought that pregnancy might be present. The patient had suffered pelvic pain more or less for two or three years. For three years she had been so severely constipated as to obtain relief only by the use of copious enemata. Her present expression was one of suffering and distress, and she desired relief from the pain caused by the presence of the tumor, even at the possible expense of her life.

Abdominal inspection showed a marked protuberance transversely across the lower region from the pubis nearly to the umbilicus, and digital examination showed the pelvis occupied by a large, hard, resisting mass. The cervix uteri was thrown well up toward the abdominal parietes behind the pubic bone, and the os could only be reached with difficulty. It was found impossible to drag the cervix in the vaginal axis at the time of operation, it having been my intention to loosen it from its vaginal and cellular attachments by the Pratt method, if this were found possible, prior to making the abdominal incision.

After the customary ante-operative hygienic and dietetic treatment at Hering Homeopathic Hospital the patient was anesthetized with the Tait mixture and placed on the table for operation, there being present Drs. H. C. Allen, M. Florence Taft, Howard Crutcher, Emmett L. Smith and a section of the senior class of Hering Medical College. All instruments, gauze sponges, bandages, etc., used were thoroughly sterilized with boiling water, but absolutely no chemical antiseptics were employed, neither carbolic acid, bichloride of mercury, iodoform or other chemical agent being called into requisition. An incision five inches long was made in the median line through the integument, adipose, linea alba and peritoneum, the tumor being quickly exposed to view. Sweeping the hand over it in all directions I found that the bladder was not attached to it anteriorly, nor were there intestinal attachments. The broad ligaments were very much stretched

and attenuated, and both ovaries were flattened and disintegrated from pressure. There were no material attachments to the abdominal parietes. The growth was tightly wedged in between the promontory of the sacrum and the pubis, so that it was dislodged with much difficulty. It lay transversely across the pelvis, the left pelvic fossa being completely occupied by a dense fibrous boss, the right fossa containing a number of fibrous bosses and the portion of the uterus not yet completely occupied by fibroid tissue. The tumor was typically interstitial in character, but a small portion of the uterine muscle being uninvaded. The growth measured in its long axis above 9½ inches, its circumference around the left lobe was 15¼ inches, and over the right lobe above 17½ inches. Finding that the abdominal incision was not large enough to admit of its easy exit this was enlarged to an inch above the umbilicus and the tumor was lifted from its bed. Double rows of sutures were quickly passed in the broad ligaments near their outer margins, and these bands were severed between the rows, freeing the growth from its every attachment excepting upon its lower surfaces. It had been my intention to reverse the Pratt method and by hugging closely the uterine neck to spare the blood vessels as much as possible, ligating when necessary, in order to remove the growth and uterine neck entire, but the absence of a distinct cervical pedicle and the difficulty experienced in getting under the tumor prevented this procedure, even had it been otherwise possible, and I found it necessary to conform to the stereotyped method of strangulating the cervix and blood vessels with the elastic ligature and serre-nœud. This accomplished, pedicle pins were passed an inch above the point of ligation and the mass was quickly severed with the scalpel. At several times during the operation it was found necessary to staunch the blood flow from large venous sinuses with artery clamps, but the total amount of blood lost in the operation was not large.

The pedicle was brought to the lower edge of the wound, the toilet of the peritoneum was made in the usual manner, the hot towels which had been made to cover the intestines and abdominal viscera during the operation were removed, the peritoneal surfaces were stitched with sterilized catgut and the adominal walls were brought together with heavy braided silk sutures. Keith's drainage tube was inserted near the lower angle of the wound a short distance above the pedicle, it being thought best not to have it in immediate contact with the latter in order to reduce the likelihood of septic infection from the stump. The wound and pedicle were dressed with sterilized but non-chemicalized gauze, and upon being put to bed the patient's pulse, temperature and respiration showed a fairly normal condition. There was almost a total absence of symptoms of shock, due in good part, I think, to the fact that extra care was manifested in the administration of the anæsthetic, to the small amount of blood lost, and to the care exercised in keeping the abdominal viscera and parietes well covered with hot towels. The usual post-operative fibroid pain was not a marked symptom in the case, and but one dose of morphia, one-sixteenth grain to one-three-hundredth grain of atropia, was administered hypodermically. I believe that even this was a mistake, because altogether unnecessary. At the suggestion of Dr. Allen a dose of *Staphysagria* was administered an hour after the operation as antidotal to abdominal shock, and beyond this the only medicinal treatment of the case consisted of a single dose of *Aconite* when the temperature reached ninety-nine and two-tenths, on the third day; a single dose of *Rhus* when there was some dryness and redness of the tip and centre of the tongue; a single dose of *Arsenicum* on the fourth day when the pulse fell without apparent reason to 62; a dose of *Bryonia* on the seventh day to encourage movement of the bowels, which had long been of constipated habit. Other than these prescriptions absolutely no medical agents were used, and I have never seen a surgical case, even of minor character, do better than did this patient under the treatment administered. The drainage tube was not removed until the morning of the fourth day. It might, perhaps, have been better removed a day earlier. The stump was closely surrounded all the way through with sterilized gauze, and its mummifying surface was kept covered with *Boracic acid.* This was not allowed, however, to come in contact with any part of the abdominal wound.

The unusual feature of this case lay not in anything pertaining to the operation, but in the fact that upon incision of the tumor there was found imbedded in the right uterine cornua, closely wedged in between two large fibroid bosses and surrounded by numerous smaller ones, a three-months male fœtus. The uterine muscle over the cephalic fœtal pole was quite attenuated by pressure, and unless the embryo had been destroyed by compression shortly there would have been absorption of the uterine tissue at this point with consequent rupture. It is not suggested that the presence of pregnancy in any wise complicated the operation, and the history of the case is offered the profession because of its extreme rarity. The uterus had evidently been occupied by fibroid growth, according to the history presented by the patient, for some years. As is always the case, the stimulating influence of pregnancy had no doubt caused marked increase in its size, and the greater pain and prominence of the tumor within the last two months is well understood.

The tumor and fœtus are well shown in the frontispiece. Figure I represents the superior surface of the growth. Figure II shows its inferior aspect, the pencil occupying the cervix, entering just below the internal os. Figure III shows the opened tumor with the fœtus lying in its native bed, and Figure IV shows it suspended from the open tumor, exposing its resting place between the large fibrous bosses mentioned.

Since having performed this operation I have been informed by Prof. J. R. Boynton, of Hering Medical College, that he has had a similar case, and I have a letter under date of February 26, 1894, from Prof. William Tod Helmuth, New York, in which he informs me that he once removed a "red fibroid" in which a two-months fœtus was found in the left uterine cornua. As has been shown in the first part of this article these finds are so unusual that it would seem that

Profs. Boynton and Helmuth should have placed their cases on record, and it may be of interest to the readers of this article to know that it is not unlikely that both will comply with my request and describe and illustrate them in the pages of the Medical Century at early date.

Surgery.

CLINICAL CASES IN ORIFICIAL SURGERY.

By W. E. GREEN, M.D., Little Rock, Ark.
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There has been such a vast number of clinical cases in orificial surgery reported that it seems as though the medical profession must be surfeited even on a good thing. Yet, with all this, we have some things that are too good to keep, among them, in my own case, are the following:

Case I. Pernicious Anæmia.—Mr. S., aged 21, has been suffering from progressive anæmia for several months. The pallor, though highly tinted with the characteristic lemon yellow, was very marked. Minute petechiæ hemorrhagica were scattered over the body; the heart's action was quite rapid, 120 to 140, and weak, greatly increased on the slightest movement; there were hæmic murmurs heard over the cardiac region; respiration quickened on exertion; ankles and under eyelids edematous; pigmentary deposit in the urine increased; there was vertigo, ringing in the ears and floating specks before the eye. In fact, the symptoms made up a typical case of pernicious anæmia. He had been treated by many physicians, had been in the R. R. Hospital at St. Louis for several weeks but without benefit; he gradually grew worse. Upon examination I found he had large hemorrhoids, though a former physician said that they did not amount to anything. I told him I could not effect a cure without removing these. Since he had been treated so long without being relieved, consent was readily given to the operation. I placed him in the Sisters' Infirmary and did excision of the bowel (the "American" operation). He bled profusely; every arteriole that was cut spurted forth a tiny stream that looked more like bloody water than blood. He stood the operation fairly well and soon rallied from the shock. Union was entirely by first intention and he left his bed and went home on the tenth day much improved in both color and strength. He is now, seven weeks after, almost well; eats and digests well, bowels are regular, yellow tinge of complexion gone and is assuming a natural color, has gained fifteen pounds in flesh, is much stronger and has gone to work. The recovery was (excepting a few powders of *Nux.* 6x for gastric trouble) without medicine.

Case II. Chorea.—Mrs. C., aged 25, was confined with twins one year ago. Birth premature; labor severe; regained her strength slowly. Soon after her confinement the muscles of the right side of the face and the right arm began to twitch. These symptoms grew worse and the power to use the arm was almost entirely lost; she was despondent, nervous and very hysterical. Constant treatment failed to benefit her in the least; electricity was also used but without effect. Upon examination I found a badly lacerated cervix, endometritis and consequent enlargement. I recommended an operation to which she promptly consented. The uterus was dilated and curetted, the cervix repaired and several piles, pockets and papilæ removed from the rectum. Recovery was almost complete before she left the bed; she is now, two months after the operation, perfectly well.

I have cured two other cases of severe chorea that had resisted all medical treatment by orificial methods, and recovery in both cases was prompt and permanent.

Case III. Catarrhal Gastritis.—Mrs. F., aged 40, had been an invalid for eighteen years, since the birth of her first child. She has suffered for five years from a most inveterate and severe form of gastritis, that at times was most painful and which prevented her taking scarcely any food; she also had pelvic pains and heaviness that confined her to the bed most of the time. Upon examination the uterus was found greatly enlarged, retroverted and sensitive. She had been treated persistently, both internally and locally, but ineffectually, and had been operated upon for lacerated cervix without benefit. Believing that the enlarged, sensitive and retroverted uterus was the seat of irritation I recommended hysterectomy, to which she consented. The womb, ovaries and tubes were removed through the vagina. But slight shock followed and she was soon up from the operation. Her indigestion was gone, she rapidly gained health and now, though more than three years have passed, she is still happy and well.

SACRO-RECTAL ULCERATION.

By E. B. HOLMES, M.D.
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Alingham describes all the physical phenomena which accompany sacro-rectal ulceration and the other authors copy his symptoms. But none of them refer to the reflex symptoms which always accompany this disease. This ulceration always occurs at the posterior aspect of the rectum, where it is firmly bound to the sacrum and coccyx by the mesocolon. The mescolon is composed of areolar tissue, and includes arteries, veins and the lower ganglia of the great sympathetic nerve, the nerve which controls all the functions of life. These ganglia send out their branches to form plexuses and these plexuses send out their filaments to all the vital organs. One of the oldest laws of the nervous systems is that whenever disease occurs at the origin of a nerve the symptoms are manifested at the minutest ramification of that nerve. Hence very many of the supposed diseases in females are from the rectum and not from the vagina or uterus. In the male you find supposed disease of the kidneys and bladder, frequent micturition, rising every hour of the night to urinate, dyspeptic symptoms of every conceivable form in both sexes. Often the most stubborn asthma, palpitation, heart failure, and many other supposed diseases are reflex symptoms from this ulceration, which is located in the immediate vicinity of five ganglia of this most vital nerve of the body, the nerve which never sleeps, the nerve which controls all the functions of life.

Ulceration of the rectum is most subtle and

deceptive. The patient never complains of pain at the point of disease, but refers his pain to the back, higher up, or to the kidneys, or in front, at the bladder, the stomach, or to some other point. I have suffered from this ulceration myself and know from personal experience of what I write. I was supposed by one professor to have Bright's disease, by another to have ulceration of the stomach, and by yet another to have heart failure. Now I am well and have no aches or pains in any part of the body. I have no dyspepsia and I can eat boiled bacon and cabbage or any other kind of a dinner and get away with it; my digestion now is perfect, while I suffered for twelve years with most distressing dyspepsia.

I recognize this disease by the complexion, which looks muddy as if something foreign had lodged in the capillaries. There is at times a livid circle around the eyes and the eyes are lustreless. The patient complains of alternation of diarrhea and constipation, and if he will observe his stool he will find a discharge accompanying which looks like the white of an egg. This discharge is characteristic of this ulceration and is composed of mucus and pus, and sometimes streaked with blood.

The penetration by the ulcer is at the posterior aspect of the rectum and may occur anywhere between the internal sphincter and the promontory of the sacrum. It has an irregularly rounded opening which is always overlooked by any one using a bi-valve or tri-valve speculum, which on opening draws the opening together, and the observer will only see a long, pink streak across the rectum. The opening varies from the size of a dime to that of a half dollar. The areolar tissue is destroyed. There is a pocket, or cavity, lined by a tough, cartalaginous pyogenic membrane difficult to cut.

In the treatment of this ulceration I do not use the red-hot iron or any other cautery. First I thoroughly empty the bowels with a free dose of castor oil and then confine the diet to milk or curds and whey or some other non-irritating diet, and require the patient to remain in the recumbent position until the ulcer is healed. For the operation I open the sphincters with a strong bivalve speculum and inject a four per cent. cocaine solution into the tissues to be divided, then divide the gut from the opening of the ulcer, along the median line through the internal sphincter to the external, and then weaken that by dividing one-fourth to one-half of that. This gives me free drainage from the ulcer. I then cut through this tough pyogenic membrane several times and follow this with a strong curette. The object of this is to change the character of the ulcer into a recent wound, which is more readily healed by the subsequent treatment.

The subsequent treatment consists in anti-septic treatment throughout; daily, or twice a day dressing of the wound and keeping the patient in the recumbent position, and using non-irritating diet only.

As to the frequency of this ulceration, I have found it more frequent than piles or any other disease of the rectum. And as to the cause, I found in fifty-five cases, thirty-three women who trace their disease to their first delivery. Evidently the head of the child in passing pressed so firmly as to bruise the rectum and its connecting areolar tissue, and resulted in inflammation and suppuration, constipation and straining at stool as a frequent cause.

"THE VALUE OF STRETCHING THE SPHINCTER ANI IN CHLOROFORM COLLAPSE."

By W. E. GREEN, M.D., Little Rock, Ark.
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The above is the heading of an article in the "periscope" of the *Medical and Surgical Reporter*, June 6, 1893. Deception has evidently been inadvertently practiced upon the editor of said journal else this valuable truth would never have found favor with him, or have been deemed of sufficient importance to be given space in his journal. It is true it comes second-hand from across the water and from Allopathic source; this fact, as in the case of the Koch and Sequard fallacies, would be sufficient grounds to justify the "regular" profession in taking up the subject without question and heralding it to the medical world as a great and beneficial discovery. His bliss, however, will be turned to "gall and wormwood," the genuineness and value of the method doubted and an apologetic editorial will be in order when he learns the true inwardness of the "discovery." The editor doubtless does not read or he would know that this same process was discovered by a Homeopath, Dr. E. H. Pratt, of Chicago; has been practiced by hundreds of Homeopaths and numerous lives saved; that case after case has been published in the medical journals of that school. Further, that this same Dr. Daily, though a bright and successful physician, is no other than a Homeopath from the backwoods of Arkansas.

The explanation of the matter is this: Dr Daily's remarks on the subject were published in the *New York Medical Times*, a quasi Homeopathic journal without the title. This was read by Dr. Duke, of England, who put the method to practical test and published his experience in the *London Lancet*, which was republished in this country as genuine stuff. Accidents, and sometimes ignorance, may work benefit to humanity.

The following is the article in full:

THE VALUE OF STRETCHING THE SPHINCTER ANI IN CHLOROFORM COLLAPSE.

In the long, sad lists of deaths, says Dr. Alexander Duke (*Lancet*, London), from chloroform in which the various means adopted for resuscitation (unfortunately ineffectual) are enumerated, I observe no mention of one of the most valuable, in my opinion, viz.: dilatation of the sphincter ani.

This proceeding has been, I understand, in use in America for some time past and is highly spoken of by Dr. Daily in the *New York Medical Times*, February, 1893, as effective in cases of morphine poisoning.

I had lately an opportunity of putting to the test this plan of treatment in the case of a patient almost moribund after chloroform administration. The usual means having failed to obtain any response I introduced my thumbs into the anus and forcibly drew the sphincter towards the coccyx. This had the immediate effect of rousing the patient sufficiently to gasp and cry out, and when repeated later on (as she showed signs of relapsing into

the former condition) she so far recovered as to protest in a marked way against its repetition.

Dr. Daily's plan is to use a bivalve rectal speculum and by its expansion to stretch the sphincter. As the speculum may not be always at hand, I think the fingers (or thumbs being stronger) will be found to effect the desired result.

Of course one case does not prove much, but observations of its immediate effect in stimulating the respiratory functions, as stated in this paper, lead me to think it a most valuable and harmless proceeding.

The sphincter ani being the last portion of the body to give up its sensibility the converse must be equally true, hence the importance, to my mind, of adopting this plan when the patient after an anesthetic shows signs of collapse.

I trust that trial will be made of this American doctor's valuable suggestion as I am convinced its importance is not known, and may be the means of saving life when the usual treatment has failed.

Neurology.

ACRO-NEUROSES.

By GEORGE H. MARTIN, M.D.

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There is a class of difficulties which do not always have a pathological basis, and consequently have to be considered more from their clinical aspect than from any organic change which takes place in the nervous system. They involve the motor, sensory, vaso-motor, secretory and trophic nerves.

They are conditions which are not usually properly classified by the general practitioner, yet some of them are very common, and every physician has seen many cases of them. Perhaps the most common of this class of difficulties is "podalgia." which means pain in the feet.

What practitioner has not had patients, particularly women, complaining of pains in the feet which cause them a great deal of trouble. He does not, perhaps, consider them of much moment, and tells the patient that they are not of much consequence, and will pass away after a while. It is much easier for a physician to assure a patient that painful feet are not really of any consequence than it is for the sufferer to acknowledge the fact, either to himself or to the physician. These little matters physicians do not think of enough amount to cause any real serious thought on their part, therefore they banish them from their mind. and think everything will come out all right in the end. And yet this is a real trouble, one which makes life almost a burden, from the fact that the patient cannot walk, cannot enjoy herself even with the most comfortable pair of shoes on, and the mental suffering which she endures on account of restrained action sometimes becomes very serious.

This condition occurs most commonly in persons of a nervous temperament, and who have many symptoms which point to an hysterical condition. I wish to exclude in the consideration of this subject, pains in the feet caused by a toxemic condition of the general system, such as gout, rheumatism, chronic alcoholism and other diseases of like character. These to which I refer have purely a nervous basis and are to be considered as of such origin.

The common condition known as chilblains is of this class, and is, of course, due to an irritation of the nerves causiug vaso-motor spasm with consequent contraction of the capillaries, with secondary dilatation owing to a paresis of the same nerves, with irritation of the sensory filaments. Of course, in these conditions the irritation is due to cold and not to a general nervous difficulty.

More serious than podalgia or chilblains is the so-called "digiti-mortui," which is due to some systematic disturbance affecting the whole nervous system in a degree, and the fingers most of all. In this trouble we have numbness, coldness and blanching of the fingers with an inability to use them, just as we would have if the fingers had been bitten by frost. These symptoms may continue for a moment or two or for several hours. As these symptoms are passing away we have a burning and itching and swelling, which occur upon the return of the circulation as in cases of frost bite. This train of symptoms may occur once in a while, or as the disease progresses may return several times a day, so that the patient is often incapaciated for manual labor.

We find usually with these conditions an unstable nervous system. and perhaps signs of general debility. It is only a step further to the so-called Raynaud's disease in which we havc, besides these vaso-motor and sensory symptoms, trophic changes taking place in the fingers or may be in the toes. These trophic changes sometimes extend to such a degree that there is ulceration and extensive sloughing of the parts. It is similar to the dry gangrene of senility. This is a rare condition, and fortunately is it so, because it is a disease which is difficult to cure, for the reason that it is difficult to restore lost portions of the fingers or toes which have been removed by this system of auto-amputation. This is a termination, however, of quite a number of cases of digiti-mortui, and it is a most important fact for us to bear in mind when we are treating this latter disease.

Podalgia does not usually involve the trophic function of the nerves to a great degree, and consequently the worst that can be feared from the trouble is the inability to walk with comfort; nevertheless it is such a persistent symptom that it is ou duty, whenever we have it to treat, to be most careful in the selection of our remedy, and at the same time inquire carefully as to the general condition of the patient. The mistake is often made in prescribing for conditions of this character, in simply studying up the local symptomatology to the neglect of the general characteristics.

In the treatment of digiti-mortui, as that is usually the most prominent symptom, we are likely to prescribe for it without looking further for other symptoms. In prescribing for a disease it is necessary for us to be familiar with the pathology of the disease of which that symptom is a sign, or we will aim far from the mark. By the term pathology here, I mean the morbid changes which take place in the system as the result of disease. In these "acro-neuroses" it is not always easy to determine these morbid changes except such as are manifested objectively in Raynaud's disease. Some of them, however, have no real

morbid change but are purely functional in their origin. That is a point which we must determine early, if possible, in the care of our patient. It is usually supposed that in Raynaud's disease and, in fact, is generally found, that there is a neuritis existing, but this is believed to be secondary and not primary.

Now, as to the treatment of these conditions. This has been outlined in a general way in the last few sentences, but to repeat, the salient points may not be out of order. First obtain all of the symptoms that you possibly can from all parts of the body and select your remedies accordingly. In a general way remedies which tend to improve nutrition and at the same time act upon the vasomotor system will be the ones which will be selected.

Calcarea, *Ferrum*, *Kali carb.*, *Lycopodium*, *Muriatic acid*, *Nitric acid*, *Phosphorus*, *Pulsatilla*, *Stramonium*, *Veratrum* and *Zinc* will be more commonly called for than any other remedies. *Galvanism*, both central and local, is often of good use as a palliative. It has done a great deal for me in the treatment of cases of podalgia in connection with my Homeopathic remedies. Plenty of rest, freedom from worry and general hygienic treatment must be observed. In other words, save your patient all the nerve energy that you can, for it is only by the storing up of this nerve force that he will be able to combat the disease and overcome it. This holds true, not only in the treatment of these conditions which we are now considering, but of any disease in the body.

One case of digiti-mortui I will relate in order to illustrate what can be done with Homeopathic remedies properly prescribed.

Mrs. D., 30 years of age, a blonde, exceptionally fair skin, five feet five inches in height, weighing 160 pounds, has been suffering for two years from this troublesome affection. It came on immediately after the death of her little girl whom she idolized. The shock was so great to her that she was immediately prostrated and it was many months before she was able to be up. During this time there were frequent attacks of dead fingers, involving the thumb, index and second fingers of both hands, occasionally including the other two fingers. The numbness was intense and the pain upon recuperation was sometimes so great that she was unable to bear it without some relief.

At these times the fingers were as cold and white as if they had been bitten by frost. When I saw her she was suffering untold agonies from it; she was also hysterical at times, crying easily and dwelling constantly upon the death of her little daughter.

Upon considering the totality of the symptoms I concluded that *Pulsatilla* was the best indicated remedy. I accordingly prescribed it in the 6th dilution. The first two weeks there was no marked change in her condition, but after that there seemed to be a little improvement. However, I thought that I would hasten matters by using central galvanization, and the improvement was then more rapid. She was, in addition to the symptoms given, frequently attacked by severe headaches, extending all over the head, neuralgic in character with much gastric disturbance. They were blinding in their intensity, and would last one or two days without interruption. These would occur once or twice a week, and she would hardly recover from one before another would come on. *Pulsatilla* also seemed to be indicated here, and upon its administration these headaches soon began to be relieved, and now there is but little of the trouble with the fingers left and the headaches do not occur very often or with anything like the severity with which they used.

Other cases that I have had of the same condition have been invariably relieved by the proper Homeopathic remedies after months of treatment by old school physicians in which they failed to give anything that relieved the symptoms. No matter how simple or of how little consequence symptoms may seem to the physician, it is always a good plan to consider carefully a long continued and persistent symptom or sets of symptoms; by so doing we will often diagnose correctly the beginning of a serious organic disease and be able to stop it in its incipiency, and so save the patient a life of suffering or an untimely death.

Institutes of Medicine.

EXCURSIONS IN THE DOMAINS OF THE PHYSIOLOGICAL MEDICAL SCHOOL.

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FOURTH PAPER.

After having examined the field of rationality it is but fair to pass in review the so-called Empyria: Elixirs, drops, compounds of several drugs. I have not hesitated in taking up prescriptions of so-called rational physicians, for it would be difficult to find a sensible man who would find rationality in the so-called rational curative systems. Will not this search after rationality prove a failure?

1. Prof. Podvissotzky, of Kieff, communicates in the *Wratsch* (1892, No. 36, p. 903), a prescription found in the papers of his dead father of a very efficacious remedy against cholera used with much success in France:

Acidi muriatici, dr. 1½.
Thymol, gr. x.
Caffeini natro-benzoici, scr. 1.
Olei cinamonii, gt. x.

M. S. 15-20 drops 3-4 times in the course of 24 hours.

The expensive caffein can be replaced by camphor and the unpleasant cinnamon oil by peppermint oil.

2. *La Lemaie Medicale*, 14 September, 1892, communicates that Dr. Desprez, of St. Quentin, treats the cholera with the following drug:

Chloroform, grm. 1.
Alcohol, grm. 8.
Acetate of ammonium, grm. 10.
Water, grm. 110.
Morphium syrup, grm. 40.

A tablespoonful hourly till the dangerous symptoms have subsided.

The same is given as a prophylactic remedy.

3. In the *Wratsch* (1892, No. 35, p. 891), Dr. Mostovitch, of Gory Gt. Tiflis, calls attention to a drug concocted by an old practitioner, Dr. Andreisivsky. It is renowned in the treatment of

fever and particularly of cholera. This drug consists of the following ingredients:

Chinini sulphurici, zij.
Spiritus vini 40, lbs. vii.
Olei caroi, gtti, xxxxv.
Nux vomicas, z vi.
Olei citri, i iv.
Thrae trifoli fibrini g. s. et fiat cobo vividis.

4. Dr. Anshelovitch, of Biazan, has published (in the *Wratsch*, 1892, No. 34, p. 870 and p. 994) the brilliant results obtained in the treatment of cholera with his own drug, known and sold in the pharmacies under the name of "Remedy of Dr. Anshelovitch;" it costs 2 rbls., 33 cop. ($1.16.) The prescription of the remedy is as follows:

Madeira wine, 210, 0.
Acid muriatici, 5, 0.
Aquæ vitæ, 40, 0.
Pepsini puri cossici, 2, 0.
Tr. Opii simpl., 1, 8.
Tr. Belladonna, 0, 5.
Tr. Menthæ peper, 5, 0.
Syrupi, aurantis, 36, 0.

Every 20 or 30 minutes a tablespoonful.

In the session of the 27th of July, 1892, of the Medical Society of Simbirsk, the so-called elixir of veroij, or Baklanoff, was unanimously declared injurious, to which Dr. Litrin added that Dr. Betivtreff, senior physician of the Military School in Simbirsk, who has served for many years in the Caucasus, assured him that Gen. Baklanoff had concocted this elixir to render sober his drunken Cossacks. It is, therefore, to be supposed that the eulogiums printed in the papers of its efficacy in the treatment of cholera have been dictated either by malevolence or ignorance.

The author of the present article has also a word to say about the above-named elixir. It was a favorite remedy during the cholera epidemic of 1848 and did no end of harm, but it was impossible to shake the people's faith in it. During the epidemic of 1892 this elixir was once more recommended by a certain Dr. Adrecievsky, who put in an advertisement about it in the political and literary journal, *Lviet* (Flight), and it got into great vogue in Simbirsk. This induced the local faculty to publish a warning against the remedy in an other journal, the *Susskaya Fizn* (Russian Life) It was announced that the remedy was injurious as a prophylactic and perfectly useless in cholera. The ingredients out of which it is composed were also revealed, and consist of *Nitric acid, Turpentine, Petroleum, tincture of Capsicum* and *Brandy.*

A similar warning came from Torusk, and instructions were given to the pharmacies never to sell the remedy without the prescription of a doctor. The Siberian *Herald* inserted a publication that the Medical Board of Health had completely forbidden the remedy (see *Wratsch*, 1892, No. 39, p. 995). This prohibition has no practical worth, for this particular remedy is just as injurious, just as inoffensive, or just as excellent as all the remedies which have been already enumerated in this chapter, and have all been concocted, recommended and circulated by the physicians of the rational reigning medical school. The instruction given the pharmacies not to sell the remedy without a medical prescription is a proof that the prohibitors had still the latent hope that the drug might prove useful, and this is in direct contradiction to the prohibition. We should have found the veto sensible if it had been put upon all the remedies which have been just named, and upon all the different drugs which are in circulation under the name of cholera drops, such as: Botkin's, Lonzemtroff's and Thielman's drops, which all contain opium. They ought to be strictly forbidden, and a sharp eye kept open so that in case of transgression the culprit may be punished according to his deserts. I do not see why the prohibited Baklanoff elixir is better or worse than all others. In what has this remedy deserved condemnation more than those which have been spared and are generally recommended and accepted? If anybody were to say that this mixture is less injurious than many others, who will take an oath to the contrary?

Although it is a well known fact in the physiological school that the opinions about the same drug may be very divergent, so that it may be praised up to the skies by some, declared useless by others and found positively injurious by the third, still for curiosity's sake I have taken upon myself to collect the differences of opinion about the four principal remedies which have played the most prominent part in the epidemic of 1892. It would have taken too much time and have been too laborious to treat in the same manner all the remedies which have been submitted to contradictory sentences. The differences about the four remedies under discussion are more than sufficiently characteristic to show in its most brilliant colors the whirlpool reigning in the therapeutics of the rational medical school, thanks to its absence of principle.

I will begin by the mercurial remedies, of which calomel stands at the top.

1. The *Kievskoie Slovo* (the Kieff Word), a political and literary paper, contains, in its number of the 23d of July, 1892, a petition addressed to the higher authorities, signed by Prof. Vinogradoff, and published with the intention of making all the medical officers and private physicians acquainted with his plan of treating cholera.

From the very beginning he gives a laxative dose of *Calomel*, pure or mixed with *Napthalia;* one-half hour later hot tea with rum or cogniac; if the action of the heart is good *Calomel* 0,003, pure or mixed with *Napthalia*, must be continued. During cramps hot baths and hot wraps are to be applied; internally, tincture *Valerienæ*, with tincture *Convallaria majoris*, 30 drops every hour. A treatment producing perspiration is the most appropriate. *Opium* must be given very seldom, but *Calomel* frequently. This treatment must be supplemented by copious subcutaneous injections of a salt solution, 7%, mixed with soda. At the same time, the enteroclysis with tannin must not be neglected. It is, of course, to be understood that every physician must individualize the case and regulate his proceedings according to his own free will.

(2.) Dr. Tishkoff, of Tashkent, communicates (*Wratsch*, 1892, No. 30, p. 760) a mode of treating the cholera which proved satisfactory to himself, to his colleagues and, what is still more important, to his patients.

Opium is put aside as injurious. At the beginning *Calomel* is given either in a dose of 12 gr. at once or 3 gr. every hour; hot enteroclysis (40, 0

cels.) with 1% of tannin solution, subcutaneous injections of camphor oil, from 1 to 3 syringes, at once, to raise the action of the heart and circulation of the blood, pills against vomiting and frictions, with spirit of *Camphor* against cramps.

(3.) The journal, *Progress of Nursing*, contains in the October number, 1892, an article of Dr. Sevanshoff, of Kazan, in which he speaks of the excellent results obtained from calomel and castor oil, from the latter even better than from the former. *Salol* and *Kreolin* have proved unsatisfactory.

(4.) Dr. Alekseiff, Physician at the Military Hospital of Tiflis, recommends (*Wratsch*, 1892, No. 36, p. 918) *Calomel* in a dose of 10 gr. as a principal remedy, also castor oil; for the disinfection of the intestinal passage he prescribes *Salycite of Bismuth*, alone or combined with *Salol*, from 5 to 10 gr. several times a day, according to the gravity of the case; ¼ or ½ gr. of opium was sometimes added to these powders; also enteroclysis according to Cantani, 3-6 grm. of *Tannin*, 50 grm. *Gumami Arabici* and 200 grm. water, with or without a mixture of *Opium* tincture.

(5.) In the *British Medcial Journal* of the 24th of September, 1892, Dr. Illingworth, of Accrington, recommends the use of *Mercury biniodatum*, a remedy which has rendered him excellent service in cholera, in a dose of 1-10 gr. 3 times a day. It stops the fermentation. *Carbolic acid* taken in a dose of 2 drops is also excellent. He discards *Chloral* and *Belladonna* with *Ammonium*.

(6.) Dr. Messcheyivsky, of Arensburg, Isle of Oesel, recommends (*Wratsch*, No. 37, p 994, 1892) enteroclysis with a weak solution of mercury, and says there is no reason to apprehend any cases of poisoning. (? Rep.)

It is scarcely possible to credit that a remedy, such as calomel, which is so much praised by the authorities of the medical world, whose opinion is founded on personal observations and experiment, should, on the other side, have an equal number of adversaries; this seems hardly possible, but nevertheless, we will let the facts speak for themselves; they are only too eloquent.

FOR.

Alekseieff recommends *Calomel* as a disinfecting remedy for the intestines. (See Calomel.)

Levashoff Kazan has seen the best results. (See Calomel.)

Tishkoff Tashkent is satisfied and his patients also. (See Calomel.)

Vinogradoff Kieff recommends *Calomel* as a domestic remedy in his curative plan. (See Ibid.)

Eizenlohr finds it efficacious in the beginning of the disease. (See Confessions.)

Ratgen votes for *Calomel*. (See Ibid.)

Wuissokovitch recommends it on account of its anti-bacterial effects. (See Curative Plans.)

Sokoloff recommends it without giving any reason. (See Ibid.)

Dr. Porter recommends it among others in his method. (See Ibid.)

Wakhovitch, Petersburgh, praises it principally as a laxative remedy. (See Ibid.)

Alexinsky of Yoroslav praises it. (See Tannin.)

V. Liemssen calls it a disinfecting and non-irritating remedy. (See Skoritchenko.)

Rumpf finds its action favorable in comparison with other modes of treatment.

AGAINST.

Fraenkel Hamburg warns against *Calomel*, recommends caution, as it causes diphtheria of the large intestine. (See Confessions.)

Meyerovitch Exaterinodar calls it poison.

Skoritchenko calls the treatment with *Calomel* lamentable; it gives a mortality of 100%. (See at the beginning the report about the article of Skoritchenko.)

Tlugues is convinced that all those who are treated with *Calomel* die.

Golding Bird assures having never seen any good effects from *Calomel*.

At Horner's the mortality increased to such a pitch on account of the treatment with *Calomel* that he risked losing his practice. (See Skoritchenko for all three.)

The English Board of Health fixes the mortality after *Calomel* treatment at 73%. (Ibid.)

In Europe the treatment with *Calomel* has 62% as the general per cent. of mortality. (See Ibid.)

According to Werbinsky, *Calomel* is not suitable for disinfection on account of its by-effects. (See Todine Harch.)

Nevertheless, intoxication and diphtheria of large intestine occur. (See Confessions.)

Pedology.

PRE-NATAL INFLUENCES.

By FREDA M. LANKTON, M.D., Omaha, Neb.

In this nineteenth century of our boasted civilization we talk much of the progress of the race; of our institutions of learning; of our ability to read history from the rocks, destiny from the stars. We teach and understand dead languages and ologies and isms of various source and doubtful utility. We talk of our "Declaration of Independence," which declares "that all men are born free and equal;" that they are endowed with the rights of "life, liberty and the pursuit of happiness." This is a sentiment worthy of all admiration, but of limited acceptation. We are not "free" or "equal." The slavery of government is as nothing compared with the bondage of inherited evil tastes and tendencies. The one may be able to direct and hold the body, the other binds both body and soul. It is worse than mockery to speak of personal freedom when thousands are bound with shackles of appetite, of passion, of hatred or theft or murder; all searing the very being with their iron. While these thousands must be held responsible for yielding to these tendencies, who shall say that they have equal chances for "liberty and the pursuit of happiness"? There are multitudes who carry burdens almost too great to bear, who are far more dismayed at the temptations from within than any from without. The world is black enough but they find nothing darker than the evils lurking in their own hearts.

By what law of justice has any parent the right to thus entail suffering upon those who come after? How long shall we study all other branches of science and leave this, the very foundation of all our best and greatest possibilities, the betterment of the race, unthought of while we go stumbling on in the paths which should be clear as the sunlight of demonstrated truth?

Holy writ tells us that "the sins of the fathers shall be visited upon the children to the third and fourth generation." Oliver Wendall Holmes was once asked if it were not true that all diseases could be cured if the doctors were called early enough? "Yes," he replied; "but early enough would commonly be two hundred years before one is born;" thus giving in few words his experience in dealing with the complications of constitutional weakness, often developed during the course of acute disease, and being more than all others the cause of chronic disease.

We hold parentage culpable if it does not give its offspring the comforts and opportunities of physical and mental development. By what right has that parentage to deprive that offspring of the possibility of this physical and mental growth through inherited weakness? Is it not the inherent right of every human being called into life for time and eternity, that he should have the best chance for life in all fullness, liberty in its broadest sense, and that happiness which is the result of proper physical and mental balance?

Our children come to us without thought of duty to them until after the period of birth, when really our greatest opportunities of moulding character and influencing mentality are past. The great law of creation is that "like shall produce like." Every thing brought forth "after its own kind." That law is still in force. The child may be better than either parent, but never better than the sum total of both. The stream does not rise higher than its source. That source in heredity may be generations back. The child may seem to be better or worse than the generation immediately preceding it, but investigation will prove always that it is no worse than its primary source. Nature does not lie. She has inexorable laws with their penalties. We obey the one, we reap the reward; we disobey or ignore, we suffer the penalty, both in ourselves and in those who come after. We are given reason to guide us and the truths of science to direct us. If we wilfully close our eyes and leave to chance what should be given our best and holiest thought, we have no right to complain, when we suffer the natural results. Says Dr. George Williamson, in the Laws of Heredity: "The opportunities to create a good faculty or trait, or to prevent a bad one from ever existing are during that mysterious process known as human genesis."

In a paper read before a medical society the author, Dr. J. G. Sapper, says: "Is it not to our shame that a few men have for years practically illustrated the value of the laws of heredity?" Look at the wonderful record some of our horses are making. See how carefully the pedigree of each blooded animal is guarded and preserved. This lightning speed is not attained by chance. Witness the unerring certainty of the breeder when he unhesitatingly pays fabulous prices for an animal with no record but that of her ancestors. In doing so the odds are in his favor, for he knows that there is speed hidden if only developed. The same law is recognized in the great breeding establishments for cattle, sheep and poultry. The results have been as positive and successful in one branch as in the other.

"It requires no strongly imaginative person to picture the transformation which would occur within one hundred years were the same care exercised by man."

Says Mr. M. F. Selby: "If many of the poor creatures who fill our poor-houses, jails, penitentiaries and asylums had their pedigree written for the world to read we would find it so poor that we would not wonder that they fail and are only a blot on humanity's page. Conceived in sin, born in iniquity, rocked in the cradle of discord, dandled on the knee of discontent, is it any wonder that the trail of the serpent is about them and the mark of the beast on them, and the devil in them?"

From "Health and Heredity": "I am personally acquainted with a young woman who from infancy has reeled, and leered, and staggered like a drunken man. O, awful curse of heredity! The father's curse has been to daily witness the idiocy of his daughter called into existence by himself while beastly drunk."

Instances like these, taken from records known to be true in every detail, might be multiplied till your patience would be wearied.

I recently wrote a letter to Dr. F. M. Powell, of Glenwood, Iowa, who for the past fifteen years has been the superintendent of the State Institution for Feeble Minded Children, asking him the following questions, and stating my reasons for doing so:

First—What is the average number of your pupils?

Second—In what per cent. of them can be traced the cause of deficiency?

Third—In what per cent. can you trace any pre-natal influences as the cause of their condition?

He very kindly answered my letter at once, with just the information which I expected. Here it is:

"First—Our number averages four hundred and sixty-five.

"Second—I estimate that seventy-five per cent. or more have a history with evidences of the cause of their deficiency.

"Third—About three-fourths of all the cases present are termed congenital, due to pre-natal causes, or to influences due to delivery or soon after. You are at liberty to use this statement if it will be of any advantage to you."

This is a true but awful showing, simply of one state of this broad land of ours. Do you ask, Why do we see the children of one family differing so totally in disposition and characteristics? Why does not the offspring exactly resemble the parents as we find it in the animal kingdom?

Because in man there are constant changes in mental impressions, and great variety in conditions and environment.

Said a dear friend to me years ago, when talking of these things, "I can see in my own children the exact representation of myself during the periods previous to their births. The conditions and surroundings of my life were entirely different each time, and I can see clearly their varied influences in my children."

The Greeks believed so fully in the influence of environment upon the mother and so worshipped physical perfection and development that they surrounded their women with beautiful pictures and statuary, that their eyes might constantly dwell upon symmetry of form and beauty of feature.

It seems now to be a well established fact in science that characteristics are largely the result of mental impressions upon the mother transmitted by the nervous forces to the child. The more powerful and prolonged those impressions he greater surety of transmission, although a powerful temporary impression upon the mother may produce a permanent trait upon the organization of the child.

It is said of one of our great artists that while there was no talent of this kind in his ancestry his mother spent much of her time previous to his birth in art galleries, while traveling in the pursuit of pleasure and entertainment.

It is true of Lord Byron that his mother was a proud, passionate creature, looked upon by many as insane. We all know his peculiar erratic nature.

Another well known character of history is Nero, the emperor of Rome. His mother, Agrippina, poisoned her husband and caused his son to be assassinated to make room for her son, who in turn killed his own mother and lived a life of cruelty and vice.

The mother of Napoleon, a beautiful, young, ardent and enthusiastic woman, following her husband on horseback in the midst of wars, familiar to and beloved by the armies, becoming herself a part of the activity and interest of the times, it is not difficult to understand how a Napoleon was given to the world, with all his love and fitness for military life.

In Genesis, 16th chapter, we read the account of Hagar being driven into the wilderness and treated with a terrible injustice which must have filled her heart with hatred and feelings of revenge. In the character of her son the law of nature was demonstrated: "And he will be a wild man; his hand will be against every man, and every man's hand against him."

Many an Ishmael is given to the world in our day. The child who is unwelcome, who is hated from the time of its known existence to that of its birth, who is considered only as a cause of expense and a source of trouble, will not disappoint expectation. It spends its babyhood in fretful discontent, its childhood in devising methods of torment, its youth in lawless seeking after happiness which it has no power of grasping, and its manhood or womanhood in transmitting to the next generation its inheritance of hatred, which makes outcasts of those whose birthright has been sold for a mess af pottage.

Says Dr. Ella Jennings on Heredity: "Heredity is a subject of more importance than money making, than fame or honor or position. We cannot violate the laws of nature and expect satisfactory results. We are so dependent upon our progenitors for our organizations and the duality of our tastes and trend of our minds and appetites that it seems that it should be made obligatory upon parents to cultivate such conditions of mind and body as will result in the best possible children. If we wish to benefit our race we must first know what will do this and then be willing to obey the laws necessary to secure these results. The physiological laws necessary to breeding have been complied with in the case of animals, in the human realm, the heart, soul and brain qualities, with intelligent direction, should produce the greatest results in superior children. When parentage is elevated to the plane upon which it belongs, when motherhood and fatherhood are regarded as divinely sacred in their office, when preparation for the child begins in the ante-natal education, when men and women are fitted to become parents to an immortal soul, then to bear great and noble children will be the rule rather than the exception."

It has been one of my greatest pleasures, based upon scientific interest, to trace these pre-natal influences and conditions. There are great laws which underlie this problem of life. After reading, study, and personal investigation and interrogation, I am forced to the same conclusion that others have been before me, that practically our powers and possibilities are fixed before we ever see the light of day. Traits of character may be improved by education, and cultivation enhanced by environment, or held in abeyance by self-control, by unceasing vigilance and the discipline of life. But the characteristics are there to be acted upon as circumstance and surrounding shall determine, as surely as the seed planted in the earth will bring forth its kind.

We do not sow wheat and reap corn. We do not go to the blackberry bush for strawberries. We do not find acorns on elm trees. We *do* find a poor mother hen trying to be faithful to her brood of strangely conducted ducklings, whose natures seem peculiar to her, and whose tendencies she fails to understand. The fact that they are not drowned is a continual source of wonder to her, and her unheeded warnings of danger a continual menace to her peace. We smile at her alarm, we know its cause—that each is but following the natural laws governing it. Many a child comes into the home as utterly at variance with family characteristics and family traits as the poor duckling, but here, too, we find the law of inheritance holding good. The impression, the passion, the appetite, has produced its natural result. The temporary condition of the father at the time of conception, or that of the mother in the period following, has stamped upon the organization of the child its future greatness or weakness.

It is a well known fact that during the period of gestation the nervous system of the mother is at its highest tension. There is an increased supply of blood, a stimulation of the whole body, a peculiar susceptibility to all external surroundings and to mental impressions. She feels conscious of new powers. She has entered into the "Holy of Holies" and become a co-worker with God. She thinks her thoughts, she dreams her dreams.

Says Henry Ward Beecher: "Of all creative acts none is so sovereign and divine. Who shall reveal the endless musings and prophesies of the mother's soul? Her thoughts dwell upon the unknown child; thoughts more in number than the ripples of the sea upon some undiscovered shore. To others in such hours woman should seem more sacred than the most solemn temple, and to herself she must needs seem as if o'ershadowed by the Holy Ghost."

To how many women are given the love and sympathy, consideration and thoughtful care which they crave? How many of her household seek to lighten her burdens and to make her life,

both for her own sake and that of the unborn, a happy one.

Dr. Leona Morris, of Kansas City, speaking on labor for the household, says: "Every member of the family of the future will be a producer of some kind and in some degree. The only one who will have the right of exemption is the mother, for a child can hardly be born with cheerful views of living whose mother's life, for its sake, has been a double burden. From this root springs melancholy, infidelity, insanity and suicide. The production of human souls is the highest production of all; the one which requires most perfection, truest worth and gravest care."

On the other hand every parent should remember that while the good and beautiful may be produced, the giving way to passion, to hatred, to covetousness, to discontent, may be, and are, as surely reproduced and stamped for all time as a most heavy burden upon the poor child who receives the inheritance.

Said a mother to me not long ago in speaking of her little daughter: "I do not understand the child, she is so fretful and uneasy, never satisfied; she teases and cries and frets until I am almost wild. Now Emma, her sister, is just the opposite. She is as happy as the day is long, always easily pleased and contented. They could not be more utterly unlike had they been born into different families."

Always on the lookout for facts bearing upon the pre-natal life, I asked:

"How about the periods previous to their births, were you the same?"

"Oh, no!" said she. "When Emma came to us she was our first. We were happy in the expectation of her birth. We were pleasantly situated, and I was perfectly contented and happy. When Edith was coming to us I was not well, we had financial troubles. I wanted to go to my home in the East and could not, and I was discontented and mentally miserable all the time."

Then as if struck by a sudden thought, she said: "I wonder if that could have made the difference?" And when I assured her that it had probably made all the difference, she said: "Ah, if I had only known that in time!"

She is but one of thousands who wonder at the ducklings with their strange natures, and that child is but one of thousands, doomed, so far as this life is concerned, to be overshadowed by this inherited depression and restlessness, which, after all that education and self-control can do for her, will still remain a most cruel burden for her, to say nothing of the reaction upon her home life and the lives of those who may come to her.

Influence, like the pebble in the stream, produces the ripples with their ever widening circles which break upon the shores of eternity, and whose results can only be known in the great day when "all secrets shall be revealed and hidden things made known."

I have always greatly desired to know the conditions surrounding the mother of Jesse Pomeroy, the boy murderer, who has killed his victims out of pure delight in seeing their sufferings. Could the truth be known I believe that she had thoughts of hatred and revenge which overpowered all affection and natural gentleness for the time being. It may be that she was treated with coldness or cruelty until every fibre of her nature seemed concentrated in the desire to cause the suffering which she was made to endure. The law of cause and effect is there could we but know it. "Men do not gather grapes of thorns or figs of thistles."

God is not the God of disorder, but the God of order. He who set in motion the planets, who established the seasons, who shows in each work of creation the most perfect system, has not left man, his greatest and best work, made in His own likeness, the creature of chance. It is an axiom of science that for every effect there must be an adequate cause. That many scoff at and deny facts makes no difference with the truth. We may shut our eyes and declare that there is no sun, but that does not dim his lustre for the open-eyed.

Do you say that it is not easy to carry out the suggestions here given; to rise to noble living, to be what you wish your children to be, to rise above environment? None of these are easy, but all of them are possible. Everything of value in this life must be paid for in its equivalent. Remember, the work is greater than that of any artist or sculptor, great as their work may be. It is fitting that these words should be spoken here upon this platform, in this wonderful building planned by a gifted woman, filled with the work of women, showing in its management the thoughtful care of the true motherhood and sisterhood of humanity. They have made it possible for even the babies to be cared for while the mothers feast their beauty-loving souls. You may travel the grounds over, and you will see no greater works of art than the living statuary in the nursery across the way.

What are their lives to be? Largely what their parents have made it possible for them to be. We cannot evade responsibility. That old cry "Am I my brother's keeper," goes ringing down the ages. If we do not accept the fact we must meet the same accusation, "The voice of thy brother's blood crieth to me from the ground."

I am not a prophet nor the son of a prophet, and yet I venture to predict with great certainty that many a child born during the coming years will show both in beauty of form and genius of brain, the results of the impressions made upon those who have seen here gathered together from the uttermost corners of the earth all the wonderful conceptions and powers of the human mind, here in this wonderful garden which seems to be the culmination of the ages, where we catch a glimpse of the beauties of the New Jerusalem.

Laryngology.

"FOOTSTEPS OF A PREDECESSOR."

By H. BALLOU BRYSON, B.S.D., M.D., Pittsburgh.

In the December Century, in an article entitled "Surgical Solvents in Chronic Purulent Otitis Media," Dr. R. S. Copeland says: "The surgical use of the digestive ferments is not a new idea. . . . But, so far as my knowledge goes, no mention has ever been made of the application of the idea to the treatment of chronic purulent otitis media. I claim originality only for extension of the

thought; but my belief of priority in this field may be a mistaken one, although I have not discovered footsteps of a predecessor." Continuing he says the ferment used in such cases may be "any form of *Pepsin, Extract of Pancreas* or *Papoid:* * * * * but in my hands *Glycerinum pepticum* (Fairchild) has proven satisfactory."

The purpose of this article is simply to exhibit to the profession the "footsteps of a predecessor" in this field, and not in any way to reflect upon Dr. Copeland for claiming priority in a region previously occupied by several investigators.

The footsteps I have discovered are as follows:

Henry C. Houghton, M. D., Prof. of Otology, New York Ophthalmic Hospital, in a clinical lecture on suppurative otitis, is on record as saying that "We possess a very valuable agent, *Papoid* (*Carica papaya*) which can be used as a local application.

"My attention was first called to this agent by the late Prof. C. T. Liebold, who was for some years connected with the New York Ophthalmic Hospital.

"It is a variety of South American melon and a vegetable digestive ferment, but it has the peculiar property in that, unlike pepsin, it is as efficacious in gastric digestion. It acts outside of the body and digests in any cavity containing pus or muco-pus, and so is admirably adapted for local application.

"It can be used dry but acts better combined with glycerine. My objections to its use in the dry form, uncombined, is that it forms a crust and confines the product of suppuration in cavities and sinuses. A few drops of the glycerine should be placed in the ear and by the aid of the stomach pump or aural syringe it can be forced into the middle ear and through the Eustachian tube into the pharynx.

"In suppuration complicated by mastoid disease the glycerole can be driven through the sinus to the external surface of the mastoid.

"An objection sometimes met with in the use of the glycerole is the peculiar idiosyncrasy of some patients, but it is of rare occurrence; this also happens with some of the preparations of petroleum.

"To avoid the danger of retaining the products of suppuration papoid can be combined with sugar of milk and boracic acid, equal parts—as I have suggested when using hydrastis, plantago and calendula."

This and all literature point to Dr. Leibold as the original investigator in the use of surgical solvents in chronic purulent otitis media. This practice of Dr. Leibold's must have been inaugurated almost if not fully a decade ago, for he died November 30th, 1886. In a personal letter Prof. Houghton says: "I was aware that he (Prof. Leibold) was using papoid powder in suppurative otitis before his death; but he had not carried his experiments to a point sufficient to satisfy his mind and give the testimony to the profession. After his death Dr. Frank H. Boynton succeeded him in some of his relations and followed out the experiments which he had inaugurated. I, myself, obtained the powder from Eimer and Amend and used it with great satisfaction. When the Papoid Company was formed I obtained the powder and the glycerole from them; and from that time I have pursued the practice, depending on its use with great satisfaction."

Such is the history of the use of a digestive ferment in purulent otitis by investigators of our own school. But evidence of such use is not confined to our own practice and literature. In the *Edinburgh Medical Journal*, January, 1891, R. McKenzie Johnson, after one year's practice with it, reports good results from the use of

Sol. papain (5%) - - - - -	f℥ss.
Sodii bicarb - - - - -	grv.

Of this 15 minims are dropped into the affected ear, retained for one hour and then the ear is syringed with boracic acid solution and carefully dried. His experience led him to especially recommend this treatment in chronic cases characterized by scanty, ill-smelling discharge.

Again, suppurative otitis is not the only aural condition in which a digestive ferment has been used. The same authority from which Dr. Copeland quotes his formula for *Glycerinum pepticum*, almost in the same connection, says: "Medical literature shows the record of the successful use of * * * * pancreatic extract and pepsin in the * * * * auditory canal." In the *Medical News*, November 5, 1887, Dr. F. C. Fernald, Washington, D. C., reports the successful treatment with *Trypsin* of a case of aural diphtheria supervening in a case of chronic purulent otitis of five years' standing.

Hence we see that not only is "the surgical use of the digestive ferments not a new idea;" but that "the "extension of the thought" to the treatment of chronic purulent otitis is not a new idea. However, this does not invalidate the claim as to the originality of Dr. Copeland's work. History must recognize Dr. Leibold as the unquestioned pioneer in this use of a digestive ferment; yet it is doubtless equally true that Drs. Johnson and Copeland have worked along entirely independent and original lines. The history of medical progress, as that of discovery and invention in every field, is frequently marked by these coincident, yet independently erected, mile-stones. Evidence is not wanting to show that the discovery of anesthesia was not independently, and almost simultaneously, made by different investigators. Evers, in 1773, announced his discovery of the mydriatic power of belladonna, entirely unconscious of the fact that ninety-seven years before (1676), Dr. Ray had announced his fortuitous observation of this same property. As to this same remedy there is yet another coincidence: Mein isolated the alkaloid, atropia, in 1830; yet Geiger and Hesse, still ignorant of Mein's discovery, and working with equal originality, accomplished the same in 1832.

Verily "Ben Hur's" wise men are not the only persons who, inspired with the same idea, starting from different points and traveling by different routes—each without the knowledge of the other—have arrived at the same point.

Rhinology.

MUTILATION OF THE NOSE.

By H. WORTHINGTON PAIGE, M.D., New York.

The title to this paper was suggested by a similar caption to an abstract and editorial comment

in a recent issue of the *Medical Record*. The critic in reviewing a new work on diseases of the nose recently published, says: "The work has appeared none too soon, as it is quite time a halt is called in the reckless mutilation, under the name of surgery, of so important an organ as the nose. It has become a fad with the young specialist in this country, and particularly in this city, to cauterize, cut, tear, saw or trephine the interior of the nose, ostensibly for the cure of asthma and other so-called nervous reflexes. Dr. MacDonald declares that in his practice this heroic treatment has in some cases actually caused asthma." To which the *Record* adds: "We suppose the nasal organ will have to suffer for a time yet, since the laity have been educated in this direction, as they formerly were in respect to cauterizing the os uteri for 'ulcers,' but when the reaction comes the surgical instrument-maker will have an interesting collection of useless hardware on his hands."

There is a foundation of truth for this severe criticism. This is a surgical age. The surgeon in all specialties is rampant. Daring operations formerly regarded as impossible are now successfully performed. Abdominal surgery especially is passing through an acute exacerbation, with nose and throat surgery a close second. A perusal of current medical literature and even the daily press would lead us to fear that the present criterion for the surgeon is, Can an operation be performed? and not Should it be performed? All this applies in naso-pharyngeal surgery. Such skill and ability to do is very interesting and "advancing" to medical science, but is it of corresponding great benefit to the people? Are so many lives actually saved? Do statistics show that the death rate is less in proportion to the population than it was twenty years ago? Or are diseases becoming more severe and intractable and human vitality less resistant, so that this progress of medical and surgical possibilities is necessary to keep pace with disease and preserve the population? If so, and both sides—disease and medicine—keep on advancing in the same ratio, at the end of the next decade it would almost seem that medical science will have to declare it cannot carry out the contract or else must subdivide its various branches more and more. We may then see on professional cards "Diseases of the tonsils exclusively," or "Special attention given to deflected septinarium." The old school especially has been wonderfully progressive (?). It has discovered the germ peculiar to several of our most fatal diseases, notably tuberculosis and cholera. It has identified this germ as the cause. Its greatest students after years of research have announced with a flourish of trumpets the specific methods to cure these ravaging diseases via the germ. Its representative men have fairly tumbled over each other to get the precious specific or try the "scientific method." Yet people seem to die of cholera; tuberculosis claims its usual quota of victims; rabies still kills, and even old men remain feeble in spite of the "elixir of youth." These discoveries have proven failures to cure.

Now to return to my text. Laryngology has kept pace with all this march of science. A few years ago nose and throat specialists were comparatively rare. Exclusive laryngologists could be counted upon the fingers of one hand. Now large clinics are numerous and each has its staff of laryngologists, more or less exclusively such. Again, a few years ago the methods of treatment were more in the line of medicinal substances locally applied. Now the man who most skillfully and frequently operates, first acquires fame and reputation as a specialist. Is it because he best cures diseased conditions thereby or only because he affords prompt (but in many cases, alas! only temporary) relief, and thus exerts the moral effect over the patient and physician of having done something. In other words, the man who removes the results of the disease is recognized as a better specialist than he who treats the disease itself and its causes. Such general nasal surgery is still in its infancy, but even now the reaction is setting in. Cases are already reappearing who thought they were cured but who find even in this short time that they are suffering far more than ever, as a result of this indiscriminate surgery.

I am not disparaging judicious and conservative surgery. But are all laryngologists nowadays judicious and conservative? Do not the fine instruments now made and the better facilities for operating, combined with the existing surgical tendency, many times blind their otherwise good and cautious judgment. Surgery of the nose and throat has made great strides during the past twenty years for the benefit of patients suffering from diseases of these organs, but I believe that it has stepped ahead too rapidly and too far, not in what it has learned and may be able to accomplish, but as to the frequency and freedom with which it tries its knowledge. Drills are passed through nasal fossæ, hypertrophies are removed, spurs are sawed off, ridges trephined away, septi are fractured and straightened, all with apparent disregard of the mucus membrane thereby destroyed and the important secreting function which it plays in nasal comfort and health. It is true the fossæ are rendered more patent, but they were designed for a more important role than to merely exist as cavities, and this very patency with its gradually increasing atrophy and dryness becomes in time a source of more misery to the patient than the obstructions removed ever were.

There are a great many cases which cannot be cured or even relieved without an operation here the laryngologist has no other course. But there are many others where the spur is not a source of irritation, the hypertrophy does not seriously occlude, the ridge is not in contact with opposing surfaces. These and similar ones are the cases which may be operated upon, but should not be, at least until other means are fairly tried. We are too apt many times to look upon these various pathological conditions through the narrow eyes of specialism as purely local when they are often due to constitutional dyscrasia. Let us most carefully consider all these possible obscure causes, not forgetting that there are other organs outside of the nose and throat, and that these may be diseased and seriously contribute to if not cause the local condition which we as laryngologists are called upon to witness. The old school specialists in these troubles have no remedies which they administer internally for any special local effect, their only recourse being to tonics and alteratives for general systemic improvement, thereby indi-

rectly benefiting the locality they are treating. Our own school can do better and can get better results; for we have at our command in addition to their best topical methods, medicines, which, administered internally, are Homeopathically specific to the diseased condition of the particular organ which we desire to reach, and if in addition this remedy indicated for the local trouble covers the constitutional symptoms or habit we can secure most excellent results. Who of us would exchange our *Kalis*, *Calcareas* or *Mercuries* for "Beef, Wine and Iron" in treating these diseases? It is true that success with Homeopathic remedies requires more time and care in prescribing. Unfortunately this is often difficult to accomplish in a large clinic or busy practice, and we tend to get lax and careless. This fact accompanied by the present fine facilities (thanks to the instrument maker) for operative work, offers a dangerous temptation to the Homeopathic laryngologist to see nothing in the case but the opportunity for operation, overlooking the tout ensemble of the patient and forgetting the ability of his Materia Medica to cure.

The sugeon tends to become a materialist in medicine. Meeting prompt results from the use of the knife he comes to depend upon the knife ahead of all else and to use his Homeopathic remedies only as a matter of routine and in a crude manner, placing less faith in their effects than the more conservative physician, who knows less of surgery but who prescribes his drugs more carefully and more successfully. Is it not so? We believe the law of *Similia* true; we must then also believe it holds equally good in disease of every locality or organ. In laryngology there is a long list of drugs tried and found curative in the various diseases, and a still greater unexplored territory of the Materia Medica yet to draw from. If in addition to other means we will develop and utilize this Materia Medica we have an advantage over the old school, but if we neglect it we can do no better than they! Let us as laryngologists avoid becoming only surgeons. The quoted criticism opening this paper is perhaps exaggerated, but the pendulum of operative rhino-laryngology certainly has swung too far. I believe, however, that in the near future it will settle back to a happy conservative medium, and that the patients and laryngology itself will be benefitted thereby.

Understand I am not in this paper disparaging surgery of the nose and throat, but only the present mania for indiscriminate surgery of these organs which is not conservative and not always curative by any means. The man who does not operate is just as bad as the one who operates too much. It is the best specialist who judiciously weighs all the evidence in every case, who carefully considers the symptoms, local and systemic, the surroundings, condition in life and occupation of the patient, the possibilities of medicinal, local and constitutional treatment or the necessity for an operation. The physician who does all this and then decides what is the best course for the patient, giving him the benefit of reasonable doubt in surgical procedures, is the one who will meet with the greatest success and who is best deserving the title of laryngologist.

Dr. A. W. Hinman is successor to Dr. W. F. Knoll.

Climatology.

CLIMATE AS A PROPHYLAXIS OF PHTHISIS,

By W. CAREY ALLEN, M.D., Colorado Springs, Col.

The prophylaxis of disease is becoming a very important subject of study for the physician. The common saying that "An ounce of prevention is worth a pound of cure" contains a great deal of truth, especially as applied to many of our most common diseases. Therefore I desire to say a few words about the preventableness of consumption by a residence in a suitable climate.

Not only is climate a most potent factor in the development of phthisis, but many other diseases are induced by certain climatic conditions as well.

While climatic conditions have been studied very carefully for the last few years in relation to developed phthisis, very little has been said or written in regard to climate as to the prevention of this disease. As an acknowledged fact heredity and climate are the main causes of this very common and fatal disease. This being accepted as true let us see what can be done to prevent the development of this fatal malady.

So far as heredity is concerned we can do little or nothing, except possibly to enact laws prohibiting those who are phthisical from entering into the marital relations. I believe there should be laws passed in every state requiring persons of both sexes to pass a thorough examination before they can be licensed to marry. This examination to be made with a view of ascertaining if said parties are of such a condition of health as to justify marrying and bringing into existence offspring. This would, in my opinion, be a very strong prophylactic measure in the prevention of consumption. With such laws in force those who are predisposed to phthisis by heredity would be constrained to seek a climate early in life before the disease had developed, where they would be the least likely to develop their hereditary tendencies to consumption. Herein lies the application to the subject of this paper of what has been said in regard to laws governing marriage.

As has already been stated certain climatic conditions are among the most common causes in producing phthisis. Place individuals strongly predisposed to consumption by heredity under those climatic conditions which tend to develop the disease, and certainly, soon or late, you will find a very large percentage of such persons suffering from phthisis in some form. In view of this appalling fact how important it becomes that such individuals seek a residence in a suitable climate early in life, before the disease manifests itself.

The question now naturally arises as to what are the conditions of climate which tend to the development of phthisis. Also those climatic conditions most suitable for those in whom there is a family tendency to consumption.

As to the first question: It is conceded by all authorities tl ese are regions where there is much moisture, and consequently much cloudy weather (which conditions you will nearly always find in low altitudes), where the humidum nativum of

the soil is great and where the atmosphere is so dense that people, as a rule, do not fill their lungs to their fullest capacity, thereby leaving a portion of the apices of the lungs unused. Our lungs were made to use, and where we do not properly exercise every part of them disease is very likely to attack the unemployed portion. As a proof of this statement you genarally find the upper portion of the lungs the first affected in the incipiency of phthisis. This portion of the lungs being the last part filled in the act of inspiration, and consequently the part that is not used at all if we fail to breathe as deeply as we should, is the reason, in my opinion, why this portion of the lungs is the first attacked in the great majority of cases.

I believe a great many cases of consumption would be prevented (even in lower altitudes) if persons who have a tendency to lung trouble would develop their lung capacity by deep breathing. But the trouble is they will not do it in those lower altitudes, where the atmosphere is so moist and dense that it requires a voluntary effort on the part of one who has weak respiratory muscles to fill all the air cells during inspiration. Herein lies one of the main factors in the benefit arising from a residence in an elevated region. The atmosphere being more rare, and consequently containing more oxygen, people are compelled to breathe deeper and use all their lung capacity in order to receive the oxygen necessary for comfort. We often see this illustrated in people first coming to Colorado. They say, "I am so out of breath. It seems I cannot get air enough. I do not believe this altitude will agree with me."

The truth is such people are getting just what they need, forced exercise of their respiratory organs. As a rule they soon forget these sensations, but after a time find themselves unconsciously breathing deeper. I have known people who have increased their chest expansion two inches by a residence in Colorado for two or three years. I find that children raised in this altitude develop a much greater lung capacity, and deeper, fuller chests than those who grow up in lower altitudes. It is a physiological fact that any organ may, by proper exercise, increase its functional capacity.

In view of the above facts, how important it is that people who are endowed by heredity with weak and limited breathing powers should seek a residence in a climate where these limited capacities would be developed and increased to the fullest possibilities. There is probably no climate in the world where there can be found such a combination of conditions suited to these cases as a prophylaxis against the development of phthisis as the eastern slope of the Rocky Mountains, where the elevation above sea level ranges from four thousand to six thousand feet. The most suitable part of this region lies south of the northern boundary of Colorado and extends south, including the northern half of New Mexico. Here you avoid the extreme cold of the north and the enervating effect of the heat of the south.

Colorado Springs, lying as it does about midway from north to south of this region, offers the most suitable climate for most cases. Here you find a climate as nearly perfect as possible. The heat of summer is not oppressive owing to the dryness of the atmosphere. Then, too, there is seldom a day during the summer months when there is not a gentle, cooling breeze from the mountains, making it a delight to be in the open air. During the warmest days one may find a cool retreat in some of the many canons in the mountains, which may be reached in an half-hour drive from the city.

The winters here are not severe. While there are a few days that the thermometer may register zero during the night, yet the days are comparatively few when the sun does not shine and it is uncomfortable to be out of doors.

Let us now consider some of the climatic conditions of this favored region.

First in importance is the low humidity of the atmosphere, which seldom reaches the point of saturation, consequently dews or fogs are of very seldom occurrence. Another essential feature is the purity of the atmosphere. Tuberculous germs (as well as all other disease germs) do not thrive in a pure, dry atmosphere.

During the five years that I have lived in Colorado Springs I have never met with a case of consumption that had its incipiency in this climate. Statistics covering a period of twenty years do not record a half dozen cases. Certainly the climate of Colorado has nearly all the climatic conditions possible to the development of a healthy and vigorous lung capacity and in the prevention of consumption.

If the few thoughts expressed in this article shall be the means of arousing some of the profession to the importance of climate as a prophylaxis of disease, I shall feel that the mission for which they were intended will be fulfilled.

Associations.

THE GREAT AMERICAN INSTITUTE.

By T. C. DUNCAN, M.D., Ph.D., M. A. I. H., Etc.

PRES. NATIONAL HOMEOPATHIC MEDICAL COLLEGE, CHICAGO.

When the Institute was organized in 1844 Chicago was as far away from New York as Tacoma is now, and yet this national society, imbued with the missionary spirit, held a profitable session here in the fifties. The Institute did not come west again until 1865, when it met in Cincinnati. In 1868 it crossed the Mississippi for the first time and in St. Louis made a very favorable impression. In 1870 the annual meeting was held in Chicago and Homeopathy captured the city. Denver was a village then out on the plains. Now it is about as large as Chicago was then with better facilities for reaching it. There are many benefits that may accrue to all who may be concerned.

I would premise by saying that every Homeopathic physician everywhere should be interested in the American Institute. All should be proud to write as title "M. A. I. H." As our country grows older the power of titles will be recognized by the masses. John Smith is plain but Dr. John Smith has risen in the estimation of the people. John Smith, A.M., M.D., and especially Prof. J. Smith, A.M., M.D., has in the eyes of the people taken the highest seats among the sages. John Smith, M.D., M. A. I. H. becomes a mysteriously wise individual. Honor the cause by joining the

oldest medical body in America and thus honor yourself. Its certificate of membership should be on the walls of every Homeopathic physician's office.

Suppose that you cannot get to the meetings for years, its volume of transactions will prove as good as a course of lectures. The best thoughts of the brightest minds, as well as some not so bright, are there. If the membership was 10,000, as it should be, the sessions could last more than a week and give us two portly invaluable volumes each year.

The bulk of the membership is now in the east while the majority of the profession live west of the Alleghenies. The west (to say nothing of the south, northwest, southwest and coast) can surely beat the east. Seeing that the Institute meets west another year every western M.D. who sails under the flag of similia should become a member this year. My name was proposed shortly after I graduated in 1866. How soon the years rolled around to 1891, when I was made a Senior! An honor in our ranks equal to that of the Legion of Honor in France. I am proud of it.

It is easy to find fault with the Institute, that it does not reach the profession nor try more to advance the cause, but are we blameless in the matter? The machinery of the Institute is grand. The list of officers include those from all of the state bodies. Every section is supposed to be represented by delegates. If more time could be allowed what rousing "reports from the field of battle" could be recounted! The bureaus are supposed to gather the cream of medical thought, experience and observation. If these reports are curtailed it is our own fault. Every member should be a committee of one to bring in more members and publication funds.

Special effort should be made to go to the Denver meeting and capture the town and section for the cause. Tell your people that you are "planning to go to Denver in June to attend the sessions of the oldest medical body in America." Talk with them about it. Explain what it is doing and has done for the good of humanity. This will enthuse them—making them work for converts and revive the good old days when every convert was a committee of one to advance "the good of the order." Will that help you? I can tell you privately, just ask some of the "oldest physicians"—who, by the way, are going very fast.

Tear yourself away; there is no other way of getting away. We have all read about Colorado and the Rocky Mountains, and doubtless sent patients to Colorado Springs and other points. Go and mingle with the cured "one lung" people and hear them talk climate. Some interesting side trips may be planned, as down into New Mexico, up Pike's Peak and over to Leadville or Glenwood Springs or Salt Lake. A round trip to California, visiting Los Angeles and San Francisco, will be an experience all will enjoy and afterward know more about this great and glorious republic of which we have the honor of being citizens.

Let us charter a whole train of palace coaches from Chicago and go in grand style. Every city of any size should make up a special car of delegates. Every state society in New England should send a carload and an extra one from Boston. The middle states should be equally well represented. New York and Philadelphia, the cradle of medical liberty, should be out in force. Canada can make up a car of M.D.'s, DD.'s and tourists. If Chicago does not make up at least one car then her glory must wane. Good delegations will be looked for from the states which claim that they are "the health sections of the south and west," which will doubtless be set forth in reports and printed matter sufficient to go round.

Since 1868 we have been anxious about the membership of the Institute—and tried to close the "exit." Why do they drop out? It is a question of dues largely, for no senior resigns. Various plans have been proposed to hold the membership, but the best will be to arouse the espirit du corps. An annual address or paper that could be used as a campaign document to help arouse and keep alive the interests of the masses in the cause would be effective.

The plan of the British Medical Association to have the Board of Censors always in session would keep up a steady increase of members. The seniors especially should be a standing active committee on membership who could vouch for all applicants and so swell the members by hundreds annually. Branches, as in Canada, Mexico, South America, etc., or even in the States could be established by the Institute just as they are by the British Association. An organ would doubtless help to hold the membership as nothing else could.

Is it not about time that there was more dignity and less politics in this great scientific body? If the senate of seniors selected the candidates for presiding officer, according to seniority of rank when possible, or from among the state or branch presidents, that would perhaps make it a more dignified body. The active vice-presidents should be representatives of the different states and sections. That might interfere with the interests of some but the "reports of delegates" have never failed to arouse the old time enthusiasm. In these days of telegraphs the whole world should know how Homeopathy grows in popular favor.

A brief sketch of the life, labors and success of Hahnemann and his followers, and the popular effort to erect a monument in Washington to his memory, should be in the hands of every person who takes our remedies. I believe that subscription blanks and posters can be supplied in unlimited quantities. The intelligent face and head of Hahnemann make friends for the cause. It made a Homeopath of the writer.

Facetiae.

"A LITTLE NONSENSE NOW AND THEN."

WHAT TO FEED THE BABY.

All the physicians of any experience have had babies—that is, most practicing physicians have been solicited by the energetic parent to attend a baby in confinement and to relieve it from its embarrassing position, and especially doth the physician labor to bring in the offender by means fair or foul, by persuasion or weapons, dead or alive—if there be a sufficient reward hanging over the said offender.

After the excitement has subsided, the great question of nutrition presents itself. How is this little red angel to be nourished? Is mama willing to nurse her darling? Yes? Well and good. No? Oh, visions! sick baby, wet-nurse, artificial foods, one cow and several nightmares.

As to artificial foods, there are still a few on the market. It would be a blamed sort better for the babies if there were fewer, but it would be a sad loss to the doctors; for there is nothing a physician need possess so much as resources.

There is only one which I have used and that is Melon's Food.

Now melons are all right in their place, but should only be used the first few days after birth, as there is no doubt as to their beneficial properties immediately following a prolonged fast; but as a staple article of diet their reputation has suffered—and so have we all of us.

Cow's milk is highly recommended and I should judge it has been used very freely by the number of calves we see about us. However, I have advocated the cow.

I leave the following list of instructions to be delivered to the milkman:

1. The milk must be from one four-legged cow.
2. She must be a red cow with the exception of the end of her tail, which must be white.
3. She must have four good teats.
4. She must chew her own cud and do it intelligently.
5. She must be fed on white clover to whiten the milk, and buttercups to render it rich and creamy. She should be watered at one spring, containing iron with a trace of magnesia.
6. Be sure to bring us the milk of one cow.

I have never experienced much difficulty in raising babies on cow's milk, and it can only be due to my systematic handling of this superb question.

I suppose, or at least I have compared my opinion with the opinions expressed by other eminent physicians and we agree, that taking all the evils of baby-feeding into consideration, the wet-nurse is the least harmful to the babe, providing that the physician uses good judgment and observes the truths that are about to follow.

In selecting a wet-nurse there are several very important matters to be inquired into; whether or not her great grandfather on her mother's side walked in his sleep; if so, discard the application at once. On the other hand, if her family history be good, examine her milk, and this is an important point. It should be liquid and of a nice milky color—insist on this. Notice her nipples carefully; if they be too large and hard so that the babe cannot attack, the condition must be remedied. There are two simple methods of correcting this trifling objection. I ordinarily take my pocket knife and pare the nipple, trying the babe on occasionally to see whether it fits. But once in a while you will find a nurse who is so confoundedly inconsistent that she will object to this procedure. In that case I always dilate the baby's mouth. Pratt's dilator is very good; I would insist upon a new instrument however.

A fresh green country girl, who has had a baby, makes the best wet-nurse. One about twenty years old, with a rosy complexion, dimples in her cheeks, soft hazel eyes, and a good neck. This girl has been accustomed to raising pumpkins and she has it down to a dead easy snap, and one pumpkin more doesn't affect her equilibrium in the least. Besides she has been raised on fresh air and cucumbers since early infancy, and consequently has developed a good bust and a stomach that has no conscience.

Such a nurse as this is easily satisfied with her surroundings and will take to the outdoor exercise, so highly recommended by authorities on this subject, kindly, and if it be summer I would have the nurse sleep in the orchard at nights under a maiden-blush apple tree. During the winter a short nap at 2 A. M. on a convenient snow-drift is all that is necessary.

There is nothing like system in the management of the wet-nurse. Do not permit her to walk too much, as it curdles her milk and will produce that painful disease of early childhood known as milk-leg. There is one thing I always demand in the employment of a wet-nurse, and that is that she must positively not chew tobacco. I can imagine nothing more grating to the sensitive nerves of the esthetic physician when he inquires: "Nurse, how is the little one thriving on your sweet charity?" than to see her turn her head, pucker her lips and squrt a long stream of tobacco juice into the mysteries of the cosmopolitan slop-jar.

Stuffing the nurse with highly-seasoned food and permitting her to indulge freely in the use of wine is entirely wrong, as it encourages a bad habit and her constitution, though rugged, has not been educated to that high degree of nervous sensibility which can withstand such extravagances. They should be reserved for the physician. I always advise parents against the evil of allowing the bottle to remain in the apartments of the wet-nurse, and suggest that it be kept on the sideboard downstairs. A little wine now and then is a good thing, but don't crowd; I have known of several instances where a babe has contracted the liquor habit by sucking milk and wine through the same teat. They don't mix well, anyway. If the babe needs a little stimulation, as they occasionally do to develop ideas in their brains, permit the nurse to have a little straight whisky, and, presto, change! the babe gets a good old-fashioned milk punch without cinnamon. It is really marvelous the effect the wet-nurse may exert over the future career of an infant, as the following case will illustrate: A wet-nurse was engaged by a gentleman who always had a good supply of various liquors in the house. One day, the opportunity presenting, the nurse indulged until quite intoxicated and when her jag was at full swing she permitted the babe to nurse. The result was a revelation in that family, as this younster, scarcely four weeks old, put on his hat, left the house by the rear door and was gone for three days, when he suddenly put in his appearance late one night, and drawing a bottle of whisky cock-tail from his hip pocket, informed his startled and greatly surprised parents that he was through with a milk diet forever. Such cases as these demonstrate the impracticability of correcting the great social evil which besets us on every side and tempts us sorely if we list thereof.

Timothy Linn, M.D.
Asheville, N. C.

Note.—Dr. Linn went to Asheville a few months ago "for his health." Ed.

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ASSOCIATE EDITOR:

W. A. DEWEY, M.D., New York.

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LOOKING BACKWARD.

The Denver meeting of the American Institute of Homeopathy will be the fiftieth anniversary of the organization of that association, and, very properly, it has been determined to make it partake of the character of a jubilee session, a semi-centennial jubilee. At the meeting of the Institute held in Chicago last summer, in connection with the World's Congress of Homeopathic Physicians and Surgeons, a special committee of ten members was created to serve in conjunction with the executive committee of the Institute and the committee of local arrangements in Denver for the purpose of preparing a jubilee programme and of bringing the history of the Institute from its beginning up to the present date in concise form for the information of its members generally. This jubilee committee is manned by Dr. Talbot, of Boston, and through the general secretary we have promise that its work is of such a character as to insure a specially memorable meeting next June, a meeting which no member of the Institute who can possibly attend can afford for one moment to miss. At that meeting the Institute will look backward over its memorable history and the magnificent work which it has accomplished, and the first fifty years of its existence will be brightly mirrored in the minds and hearts of every member present.

The editor of this journal has recently had the pleasure of perusing a number of copies of the *American Journal of Homeopathy*, published as early as 1847, in New York (kindly lent us by Dr. C. G. S. Austin, of Nantucket, Massachusetts), under the editorship of Drs. S. R. Kirby and R. A. Snow, and in these volumes are found a number of references to the American Institute in the first years of its existence. In Volume I is found a record of the transactions of the third annual session of the "American Institute of Homeopathia," held at Philadelphia on Wednesday, May 13th, 1846. It is said that the meeting was fully attended, and that members were present from all the Northern and many of the Western and Southern states, from Maine, Missouri and Virginia. "The utmost harmony and good feeling prevailed. There was evident an excellent feeling of confidence, energy and zeal actuating the minds and influencing the conduct of those present, and the accounts given of the rapid advancement of the Homeopathic doctrines and the Homeopathic practice throughout the country were truly gratifying and satisfactory. In truth, its progress and success may challenge comparison with any science or any reformation in any age of the world. Much important information was received and many measures were adopted which are destined to tell upon the interest and prosperity of the Institute in the true art of medicine. Subjects were introduced which gave rise to highly interesting and eloquent discussions, and the Institute adjourned with strengthened hopes and elevated purposes and increased zeal in the promotion of true science in the healing art, and the happiness and prosperity of the human race so far as the loss of health and life are concerned." Dr. S. R. Kirby, of New York, was elected president, and Drs. Edward Bayard and R. A. Snow were chosen secretaries. The "Central Bureau for the reformation and augmentation of materia medica" made a report which was printed in Vol. I of the transactions of the American Institute of Homeopathy. At this meeting a new constitution and by-laws were reported by Dr. Williamson, of Philadelphia, and adopted. Letters of regret were received from Drs. W. E. Payne, of Bath, Maine, William Price, of Cincinnati, and our late Dr. D. S. Smith, of Chicago.

Among the important actions taken at this meeting was the adoption of a series of resolutions introduced by Dr. Eliphalet Clark, of Portland, Maine, proclaiming the leading object of the American Institute of Homeopathy to be the augmentation and improvement of the materia medica, and recommending that special effort be made by all the members of the Institute and associations throughout the country toward drug proving and the development of a reliable materia medica.

The "Central Bureau" in that department for the ensuing year was made up of Drs. Constantine Hering, Jacob Jeans, Charles Neidhard, Walter Williamson and James Kitchen. Boston was selected as the place for the fourth annual session, the meeting to be held the second Wednesday in June, 1847.

A complete list of the members of the Institute at that date is published in the *American Journal of Homeopathy* in connection with a report of the meeting, the entire number amounting to

one hundred and fifty-three. It embraces such splendid names as George Belcher, William Channing, Eliphalet Clark, H. H. Detwiller, our late Samuel R. Dubs, the three Drs. Ehrman, Josiah Flagg, John F. Gray, H. N. Guernsey, William S. Helmuth, C. J. Hempel, C. Hering, B. J. Joselyn, F. R. McManus, Henry Paine, J. H. Pulte, A. E. Small, W. Wesselhoeft, P. P. Wells, W. Williamson, and other grand men in Homeopathy.

As we look back over the work of those early days and recall the struggles and privations and triumphs of the early fathers in our school of practice it should stir the heart of every one of us to greater activity in the present day. We need more of the zeal and enthusiasm more of the honest effort towards a real Homeopathy, more of real love for human kind and true science in the art of healing, such as they possessed and exemplified in their earlier works. These given and the Homeopathy of these closing years of the nineteenth century will reflect the pioneer work of those grand men who organized the Institute just fifty years ago. We do not know of a more fitting method of celebrating our fiftieth anniversary than by recalling and enlarging upon the work of the men who founded the American Institute, and by engaging in Denver in a general revival in the old-fashioned Homeopathy.

It is presumed that the jubilee committee will give us all the essential facts connected with our early history as an association, and if they can disseminate courage throughout the great body composing our national association and add a little leaven of zeal and earnestness such as was shown in the earlier meetings of the Institute, they will make this Denver session the most memorable medical meeting that has ever been held on the American continent. Nothing short of this ought to satisfy the wishes of its members.

THE STATE SOCIETIES.

With the coming of spring the annual meetings of the various state associations will convene. Missouri leads off with her well established Institute at St. Louis, in April, and all over the West the clans will gather in April and May. A few of the societies meet as late as June, and just a few others hold their annual sessions in the fall. But the large majority of the middle and western states hold their state medical meetings in the spring, and the time is close at hand for the conventions.

There are special reasons why the meetings of this spring should be unusually well attended. All over the country there seem to move a wave of legislation, and in no state in the West, if, indeed, in the whole country, are the interests of Homeopathy safe from the attacks of a designing and selfish foe. In such states as Illinois and Ohio, even, we find the old school people forever at work legislatively, and only by the utmost carefulness and the most constant watchfulness on the part of the representative men of our school are we able to prevent them from securing the enactment of medical bills framed with reference to special favors for them and but little, if any, recognition for us. Even now in Ohio our rights are attacked in a selfish and restrictive medical bill, and but for the loyalty and devotion of a little handful of brave men we would have been snowed under at Columbus this month and last, the great and mighty Homeopathic profession of that state sitting idly by the while seemingly indifferent as to what legislation might be enacted. Thus far we have not heard of anything like concerted effort on the part of the great body of the profession of Ohio toward the defeat of objectionable measures which have been introduced by representatives of the other school, and if we are saved from utter defeat at Columbus it will surely be no fault of our armies in Cleveland, Cincinnati and other points in the state where we are strong. It has been repeatedly shown all over the country that eternal vigilance is the price of our liberties, and the state societies must needs have a care that the interests of our school are well looked after in this especial relation. Strong legislative committees should be created in every state association, and a policy to line with that of the American Institute of Homeopathy, opposition to the old school's favorite measure, the examining board plan of control of the profession, should be proclaimed in every state in the Union. The other side presents a solid front; we should do likewise. Their warfare on us in Europe has been most successfully waged through the examining board plan, and small wonder is it that they would like to foist it upon us here. Let us fight it at every step, and every member of the profession not in sympathy with this crushing-out measure should be at his state meeting this spring ready to do and to die, as it were, in his opposition to this abominable form of medical control.

But not only in the legislation of defense should we be on guard constantly. Aggressive measures should characterize us from this time on. Homeopathy is justly entitled to recognition and representation in every medical institution under state control in all this broad land. Our physicians and our patrons pay a good share of the taxes of the country. They represent a good citizenry. They are the full equal before the law in all things else with the members of the old school, but when it comes to the matter of government appoint-

ment in medical place we are practically disfranchised. A warfare as determined, as constant, as intelligent as it will be just should be waged until we secure the full measure of our rights and privileges everywhere. If our state and local and national societies will but agree upon a plan of aggressive campaign, and if we will all work in unison and harmony and persistence before the bar of public opinion and the legislatures and courts of the country in a very few years we will be medical citizens in all the name implies. Individual effort oftimes accomplishes much, but concerted effort by a large profession is more certain to accomplish good results. We should be most thoroughly organized, and if we but present a solid front our forces will surely achieve much more in the way of substantial work for ourselves and the interests we represent than we are now accomplishing. And for this reason every member of the profession in every state in the Union owes it to himself and his profession to attend and take active part in the campaign work of Homeopathy.

But, were there neither work of defense nor of advance ahead of us it will amply repay us all to attend the meetings of our various state associations. The man isn't born who knows more than his fellows. Show us a man who cannot learn something at the state society meeting and we will show you a conceited bigot and egotist. While it is true that there is always a good amount of chaff thrown in with the wheat it is also true that there is a liberal amount of good grain to be garnered at any medical meeting, no matter how limited its attendance nor how humble its membership. Contact of mind with mind is sure to brighten and improve us all. And since it has become quite the rule, and a most excellent idea, too, for the more distinguished men of the profession of the cities to attend the various state society meetings over the country and participate in their deliberations, it can no longer he said that they are lacking in special features and unusual interest. There is always much enjoyment to be had at them, much needed rest to be secured, much valuable information to be gathered. He who claims otherwise is a cynic or too lazy and impecunious to attend his state society.

Let us all attend the spring meetings this year. They need us, but not more than we need them. Take a few days off. Give your patients a chance to get well and the old school colleague of your town a little chance to make hay. You will be better for the rest and recreation and your patrons will readily acknowledge the fact that the time thus spent is really spent in their behalf and they will praise you for it. Go to your spring meeting, take part in the discussions, stand firm for the policies of our school in the matter of legislation, aid in aggressive measures for Homeopathy and you will have done naught but a reasonable duty, for which you will enjoy the reward belonging to a consciousness of having done that which belongs to you as a member of a scientific and rising profession.

Editor's Table.

Mrs. S. M. Hicks, M.D., Atlanta, Ga., has removed to "The Grand," with hours from 11 to 3.

Dr. O. Stewart Bamber, Rochester, has removed from 75 Rowe street to 75 Lexington avenue, that city.

The eighth International Congress of Hygiene will be held at Buda-Pesth, from the 1st to 9th of September, 1894.

Dr. Theodore Schultz, of Evansville, Indiana, was stricken with paralysis recently and is in a very precarious state of health.

Dr. N. M. Collins, Rochester, sailed for Europe last month for the purpose of engaging in extensive hospital study in the art of surgery.

It is said that a Mrs. Johnson, of San Francisco, has bequeathed the magnificent sum of $6,500,000 to found a free hospital in that city.

Prof. N. Schneider, of Cleveland, has been reported as seriously ill recently, but is now convalescent and recuperating in the South.

The Massachusetts Homeopathic Hospital received and treated during 1893 1,097 patients, with the very low death rate of 3.37 per cent.

The National Homeopathic Medical College, Chicago, has issued an announcement for a Spring course opening March 29th and continuing two months.

Her many friends in the profession will regret to learn that Dr. Julia Ford, of Milwaukee, has suffered a stroke of paralysis and that her health is despaired of.

Dr. J. A. Vincent, the Homeopathic member of the State Board of Health of Illinois, spent a few days in Chicago recently in connection with his duties as a member of that board.

Dr. T. Griswold Comstock and wife have been spending a portion of the winter in California. They report themselves as being especially well pleased with San Diego and its vicinity.

The Rochester Homeopathic Hospital is to be enlarged by the addition of two new wings, to cost about $32,000, and to be memorials to the late Hiram Sibley and Don Alonzo Watson.

Dr. G. F. Washburne, Chicago, has removed from the West Side to 197 Forty-seventh street. His down town office is in the Columbus Memorial building, with hours from 3 to 5 P. M.

Dr. Millie J. Chapman, Pittsburg, has removed her office from 916 Penn avenue to 804 the same avenue, with office hours from 9 to 11 A. M. and 2 to 4 P. M. Her residence is at 5824 Rural avenue.

Dr. Frank Morley, who recently removed from Sandusky to New York, has returned to his for-

mer home. Dr. F. H. Lehman, who succeeded Dr. Morley at Sandusky will remain in that city in practice.

Dr. I. C. West and Dr. E. E. Davis, of Dallas, Texas, have formed a partnership with offices at 301 Elm street. Drs. West & Davis are a strong firm, and we predict for them a successful business alliance.

The next annual meeting of the Homeopathic Medical Society of the State of Wisconsin will be held in Milwaukee May 29th and 31st, inclusive. Dr. G. H. Alexander, 520 Mitchell street, Milwaukee, is the secretary.

Dr. E. Cross has sold his practice at La Grange, Illinois, and has moved to Black River Falls, Wisconsin, being obliged to make this move on account of his wife's health. We are glad to say that Mrs. Cross's health is improving in her new home,

The Chicago Academy of Medicine is holding an interesting series of monthly meetings in one of the parlors of the Grand Pacific hotel. Dr. Charles Gatchell is president of the Academy and Dr. C. S. Weirick secretary.

Dr. E. B. Holmes, of the National Military Home in Kansas, expects to locate about the last of May in Kansas City, Kansas, for the practice of orificial surgery and the treatment of hernia. The doctor has had wide experience in these specialties.

There will be soon issued from the press, under the authorship of Dr. J. G. Malcolm, Hutchinson, Kansas, a condensed concordance of the Homeopathic materia medica. The book is now in press, and it is expected that it will soon be on the market.

Dr. and Mrs. W. O. Clark, Burlington, Iowa, suffered a sore bereavement recently in the loss of their little son, Kenneth, who died from membranous croup on the last day of February. Their friends in the profession will sympathize with them in their loss.

Mrs. William Tod Helmuth, New York, has been elected president of the Sorosis Club, the most celebrated club of its character in this country. In her election Sorosis may truly be said to have honored itself as well as having conferred honor upon Mrs. Helmuth.

The March number of the *North American Journal of Homeopathy* is one of the best ever issued by Drs. Porter and Roberts. We congratulate our colleagues of the "Greater New York" on the earnest and successful efforts they are making in Homeopathic journalism.

The fourth annual post-graduate course of the Chicago Homeopathic Medical College will commence on Monday, April 9th, and continue two weeks. Hering Medical College's first post-graduate course will commence on the same date and last three weeks.

That hybrid periodical, the *New York Medical Times*, congratulates the old Cleveland college on having dropped the name "Homeopathic" from its title. Some Homeopathic journals of this country regret the change, but if the *New York Times* is 'appy what's the "hodds?"

Dr. Lucy Waite and Dr. F. Byron Robinson, of Chicago, surprised their many friends in the profession by uniting in matrimony on the 6th inst. Dr. Robinson is well known in the old school and Dr. Waite has an extended reputation in the Homeopathic profession.

The ladies of the Prover's Union of the American Institute of Homeopathy are at work experimenting with drugs in accord with their plan of investigation, and it is not unlikely that some very satisfactory reports of their work will be presented at the Denver meeting.

At a recent annual meeting of the Denver Homeopathic club Dr. J. Wiley Anderson was elected President, Dr. C. W. Enos, Vice-president; Dr. S. F. Shannon, Secretary, and Drs. S. S. Kerh, J. B. Kinley and E. H. King, Censors. Dr. W. A. Burr was elected delegate to the American Institute of Homeopathy.

The next annual meeting of the Minnesota Institute of Homeopathy will be held in Minneapolis May 15th, 16th and 17th. A large attendance is expected. This is one of the Homeopathic associations of the great Northwest, and has accomplished much good in times gone by for our school in its commonwealth.

The commencement exercises of Hering Medical College will be held on the 10th of April. Prof. W. J. Hawkes will deliver the faculty valedictory, Mr. Shaw, President of the Senior class, a class valedictory, and the Rev. Willard A. Scott will deliver the annual address. The exercises will be held at the Grand Opera house.

The Laura Franklin Free Hospital for Children, New York, shows a death rate during the seven years of its existence of only 2.61, and during three of those years the death rate was less than two per cent. This speaks volumes of praise for the management and medical and surgical staff of that institution.

Dr. F. D. Holbrook, of the Lincoln Park Sanitarium, has recently visited the colleges and clinics of New York, and during his stay in the East took occasion to knock the scales off the eyes of some of these New Yorkers and tell them of progresses in gynecology and surgery in the West in a manner which at once pleased and instructed.

Dr. H. G. Bayless, Professor of Surgery in the Southwestern Homeopathic College, Louisville, Kentucky, has returned to his former home, Knoxville, Tennessee, the Ohio River climate not agreeing with his health. He retains the chair of surgery in the Louisville college, and will visit that city from time to time to give his course of lectures.

It is said that the Homeopathic physicians of Denver are seriously considering the founding of a Homeopathic college in that city. There is plenty of excellent material in the Colorado metropolis for a good college faculty, and should the measure be determined upon this journal does not hesitate to predict a successful issue. Those Westerners know how to move things when they try.

Dr. Julius G. Schmidt was found dead in his bed on the morning of March 2 at his home on the corner of Andrews and North streets, Rochester, New York, his death being caused by heart disease, from which he had long been a sufferer.

Dr. Schmidt was an honored member of the Rochester Hahnemann Society, which association adopted touching resolutions pertaining to his death.

The fourth annual meeting of the Association of Military Surgeons of the United States will be held in Washington, D. C., May 1st, 2d, and 3rd, 1894. The association is composed of the medical officers of the United States Army, Navy and National Guard and Hospital Marine Service, including many of the most celebrated and distinguished surgeons of this country. It is expected that there will be about 500 delegates in attendance.

Dr. Charles E. Walton, Professor of Surgery in Pulte Medical College, Cincinnati, spent a day or two in Chicago recently looking into the management of Cook County Hospital, in which institution the Allopathic, Homeopathic and Eclectic medical schools all have representation. The Homeopaths in Cincinnati are trying to secure recognition in the Cincinnati Hospital, and Dr. Walton has been here to see how the triple management succeeds. His friends in Chicago were very glad to shake him by the hand.

The annual reunion of the alumni association of Pulte Medical College will be held in Cincinnati, in the Scottish Rite Cathedral, on Tuesday, March 29th. The graduating exercises of Hahnemann Medical College of Chicago will be held March 29th in the Grand Opera House. The commencement exercises of the Chicago Homeopathic Medical College will be held at Schiller's Theater on April 3d. The commencement exercises of Hering will be held April 10th at the Grand Opera House, Ohicago. The annual reunion of the alumni association of the Hahnemann Medical College, Philadelphia, will be held Tuesday, May 8th. Dr. I. T. Talbot, Boston, is president and Dr. W. W. Van Baum is secretary. The forty-sixth annual commencement of the Hahnemann of Philadelphia will be held at the Academy of Music on the evening of Tuesday, May 3rd.

The Homeopathic profession of Illinois is cautioned not to forget that the State meeting will be held at Quincy the middle of May. The profession of this State has been assessed by the Hahnemann Monument Fund Committee to the extent of about $6,000 as its legitimate share of the fund, and it is to be hoped that the voluntary contributions will be found to exceed this amount. Homeopathy is stronger in Illinois than in any other State in the Union, and it ought to be very easy matter for our profession to contribute their full quota. Let us go to Quincy prepared to do our share.

The legislative battle is going on in Columbus, Ohio, in full vigor. There has been a strong effort made to defeat the conference bill by the substitution of a much more sectarian old school measure, which, however, has not been able to pass the senate. The original bill, the one to which the representatives of the three schools agreed, is now in the house, having succeeded in running the gauntlet of the senate, but strenuous efforts are being made to substitute it with the bill prepared by a committee of old school men, which, if passed, would place them in active working majority on the examining board. If our friends are alive to their interests they will defeat all this legislation and insist upon the enactment of a satisfactory registration law which shall not necessarily interfere with the legitimate rights and privileges of reputable members of the medical profession.

What has become of the old spirit of independence and Homeopathic aggressiveness in Ohio? If our friends in the Buckeye state were half as active in these times as they were forty years ago, the future of all objectionable medical bills would be settled even before they were fairly drawn. To the watchmen on the walls it looks very much as though our Ohio colleagues need a revival in Homeopathy. So far as we are able to observe the legislative battle now being waged in Columbus is being fought for our side by a very small handful of zealous and devoted adherents, while the great mass of the profession in Cleveland, Cincinnati and throughout the state are sitting idly by giving this very important subject absolutely no heed. This lethargy and indifference is highly censurable, and if our throat is cut at Columbus by a medical bill which never should have become a law, the fault will beyond question lie with ourselves.

At a recent meeting of the Pennsylvania State Board of Health Dr. J. H. McClelland read a paper which was received with very much favor and very highly complimented, in which he proclaimed it to be the duty of the various commonwealths to remunerate individuals for property destroyed in efforts to stamp out contagious and epidemic diseases. It was clearly shown in his most excellent argument that it is absolutely necessary at times that private property, clothing, bedding, furniture, etc., shall be destroyed, and that when epidemic diseases prevail among the lower animals whole herds may have to be wiped out in order to properly protect our country from epidemic devastations, and right forcibly does Dr. McClelland present the justice of his position that from the public treasury people who are made to suffer the loss of property for the good of their fellows shall be properly remunerated for that loss. As is always the case in dealing with this subject Dr. McClelland shows a level head and a warm heart.

The Homeopathic Medical Society of South Dakota is announced to hold its annual meeting at Huron on Tuesday and Wednesday, June 12th and 13th. The officers of this association are Dr O. N. Hoyt, Pierre, President; Dr. G. H. Fulford, Sioux Falls, Vice-president; Dr. William Lowe, Wentworth, Secretary; Dr. J. A. Baker, Mitchell, Treasurer. While rejoicing with our colleagues of South Dakota that they are able to have a successful state society, we hope that unless they can make it convenient to go from Huron to Denver in time for the American Institute's meeting, to convene Thursday, June 14th, they will move their State meeting one day forward, making it Monday and Tuesday, in order to be at the opening session at Denver on Thursday. However, if when they adjourn, even should they meet on Tuesday and Wednesday, they will go in a

body to Denver, they will be in ample time to participate in all the really professional features of the Institute's work. Every man in the Dakotas should attend the Denver meeting, and we hope they may be there in force.

Competition seems to be the life of trade in book making as in other departments of commerce. The editor of this journal announced a new book on "Diseases of Children" last summer. This was followed within a few weeks by a preliminary announcement of a work on the same subject by Dr. Martin Deschere, New York; this second announcement was followed early in the fall by a third heralding the preparation of another work by Dr. R. N. Tooker, "aided and abetted" by a number of local writers, it seeming to be the object to rush it through the press before those already announced could be issued, and now Dr. T. C. Duncan is preparing a fourth edition of his book of twenty years ago. From this it would seem that the practitioners and students of Homeopathy need but pay their money and take their choice. It is not thought that the work of the editor of the MEDICAL CENTURY has been the direct cause of this flooding of the market, but that it has had the effect of spurring other writers to action there can be no doubt. May the fittest survive.

A series of very delightful excursions are being arranged for those members of the profession who will be fortunate enough to attend the Denver meeting of the American Institute of Homeopathy. While not just ready to make formal announcement of the railroad programme, the Transportation Committee are far enough along in their duties to be able to say that we shall have specials across the plains from Chicago and perhaps from St. Louis, and there is in contemplation an excursion over the celebrated Loop Trip, another to Manitou and Pike's Peak, and a third out through the Grand Canon, Royal Group, over Marshall Pass, etc., to Glenwood Springs, and back via Leadville and other interesting points. These excursions are to be enjoyed after the adjournment of the convention, so that its work will not be in the leastwise interfered with. But it is the intention of our Rocky Mountain colleagues to make our visit to their state an exceedingly enjoyable one, and the Institute Railroad Committee is determined that the service and excursions shall be of the most pleasant character. No one can afford to miss this Denver meeting.

Dr. T. S. Vawdrey, Plymouth, England, has kindly sent the MEDICAL CENTURY a copy of the *Western Morning News* of Wednesday, February 7th, 1894, containing an account of the annual meeting of the Devon and Cornwall Homeopathic Hospital Association, which was held in the Young Men's Christian Association's lecture hall the day previous. From the report it is learned that the association is in a most prosperous condition, and that the dispensary and hospital are doing excellent work for Homeopathy and the poor of those cities. One of the pleasant features of the meeting was the announcement on the part of the mayor, who presided, that he would give the sum of £25 to help free the institution from debt if the balance of £200 was subscribed by the end of the year. Homeopathy is steadily growing in England, and it is only necessary for our British colleagues to cast aside their ultra-conservatism and take on a little more of the radical tendencies peculiar to their brethren in the United States in order to prosper as never before in their history. Conservatism and progress never go hand in hand.

Ashhurst's "Principles and Practice of Surgery" has just been issued in an enlarged and thoroughly revised edition, by Lee Bros. & Co., of Philadelphia. For several years this work has been one of the standard text-books on surgery in the United States. Its author, Prof. John Ashhurst, of the University of Pennsylvania, is well known as one of the foremost surgeons of this country and one of the very best teachers in this department, and no book on this subject has ever received warmer commendation at the hands of the profession than has this volume, of which the present edition is the sixth. It is thoroughly practical in its every feature. Its author has succeeded admirably in keeping it well up to date in each succeeding edition issued, and the present one, No. 6, shows many changes from those which have preceded it. It is profusely illustrated, its reading text is entertaining, its descriptions of operations is unusually succinct, and perhaps no single volume in surgical literature bears greater practical value. The chapter on surgical bacteriology, by Prof. Nancrede, of the University of Michigan, is altogether new, and the gynecological sections have been subjected to careful revision and edition. A good many original illustrations have been added and some of the more important chapters have been entirely rewritten in accord with the improved surgical teaching of to-day. The volume is most heartily commended as one worthy of a place in the library of every surgeon.

Sutton on Tumors, Innocent and Malignant, is the title of an octavo volume of above 500 pages, by J. Bland Sutton, F.R.C.S., Assistant Surgeon of the Middlesex Hospital, London, on all varieties of morbid growths, just issued in this country by Lee Bros. & Company, Philadelphia. It is heartily commended to the profession as one of the most satisfactory and reliable works in this department of surgery yet issued. The author is perhaps the best known authority of to-day in the pathology of malignant and benign growths, and he has dealt with his subject in this work in a painstaking and exhaustive manner, his classification of tumors being based upon their histiological rather than their geographical or clinical character, classifications heretofore in common use. He very materially simplifies the study of morbid growths, dividing tumors into four groups: Connective Tissue tumors, Epithelial tumors, Dermoids and Cysts, giving to each group different genii, to each genus one or more species, and to each species one or more varieties. His classification of connective tissue tumors is very satisfactory indeed. He deals more extensively with dermoids than any other author after whom we have read, and gives quite a large variety of them. The book is profusely illustrated, and we do not at this moment recall a variety of tumor which is not graphically shown in a drawing or plate. The same author's recent work on the Surgical Diseases of the Ovaries and Fallopian

Tubes places him at once in the foremost ranks of surgical authorities in all this line of study, and it is enough for the surgical reader to know that Mr. Sutton has given to literature a work on tumors to cause it to be largely sought after. But not alone to the surgeon does this last work possess value; it is one which should be in the library of every practitioner and should be carefully studied by every student in our colleges. It is really the only satisfactory work on the pathology of morbid growths of which we have knowledge.

There was issued last month from the press of Boericke & Tafel, Philadelphia, a magnificent volume of nearly 900 pages which will undoubtedly receive a warm welcome at the hands of the Homeopathic profession, it being Prof. James C. Wood's new Text-Book of Gynecology, which has been in course of preparation for some months past, and of which the usual preliminary notices have been seen in the journals from time to time. Those who know Dr. Wood have had every reason to expect a really practical volume from his pen, and when they read the book they will not be disappointed. It is a rare combination of a work of value in the field of surgery and a helpful book to the general practitioner, the man who handles not the scalpel. From start to finish it deals with all gynecological topics from a practical standpoint, the text revealing at once the teacher and the operator, the prescriber and the surgeon. The preliminary chapters, in which are treated the causes of gynecological diseases, the anatomy of the female pelvic organs, the methods of case taking and the significance of gynecological discharges in making up a diagnosis are usually practical and interesting. The chapters on instruments, local treatments, electricity in gynecology and antisepsis, will prove of especial value to the student and beginner in gynecological work, while the surgeon will find very much that will be helpful and valuable to him in the treatment which the various surgical gynecological disorders have received at the author's hands. In a general way it is a book well worthy of a place in the library of every gynecologist, no matter what his school; in a special way it is a book which should occupy a place on the table of every Homeopathic practitioner, whether gynecology be a specialty with him or not. Up to the time of the issuance of this book there has been no gynecological volume in Homeopathic literature which could claim to occupy a position alongside of Skene, Thomas & Munde, Emmet, and other old school works, but now truly it may be said that it is no longer necessary for the practitioner who feels that he can afford but one book on gynecology to purchase an old school volume; for, besides possessing all that is really meritorious in any of the works named Prof. Wood's volume is plentifully illustrated with a very satisfactory presentation of Homeopathic therapeutics, and can but be found helpful to every one who will give it careful perusal. We congratulate the profession upon the issuance of this book, and express our belief that in assuming its authorship Prof. Wood has placed the rank and file of Homeopathy under obligations to him which they will not be slow in acknowledging. The work is issued in the usual most excellent style of the well known publishers.

The New York State Society held its annual meeting at Albany on the 13th of February under the presidency of Dr. J. M. Lee of Rochester. An unusually good meeting is said to have been enjoyed by those present. In his presidential address the most important recommendations made by Dr. Lee were, first, the raising of the standard of entrance examinations so that finally no candidate should be admitted into any Homeopathic college without the degree of Bachelor of Arts or its equivalent; secondly, that the term of study be lengthened and the curriculum widened; thirdly, that there be established post-graduate schools in Homeopathy; fourthly, the fullest possible teaching of drug action. He argued strongly against changing the New York law covering medical examinations, showed the danger of removing the word "tenets" from the law, and held strongly that our students should be examined in Homeopathic therapeutics and materia medica only. The following officers were elected: President, J. Montfort Schley, M.D., New York; First Vice-president, E. J. Bissell, M.D., Rochester; Second Vice-president, W. B. Gifford, M.D., Attica; Third Vice-president, W. B. Winchell, M.D., Brooklyn; Treasurer, Charles Deady, M.D., New York; Secretary, J. L. Moffatt, M.D., Brooklyn: Necrologist, W. S. Hasbrouck, M.D. The following members were elected State Medical Examiners for the ensuing year: Drs. Candee, Couch, Greenleaf, Laird, McDonald and Lee. A resolution was adopted declaring the inadvisability of making any change in the present state examining law.

A touching circumstance in connection with the meeting was the farewell remarks of Dr. H. M. Paine, of Albany, who failed of reëlection as a member of the State Board of Homepathic Examiners, and who was not reappointed on the Committee of Medical Legislation. As is well known Dr. Paine has always taken an exceedingly active interest in medico-political matters, and is really the father of the New York medical law and one of the strongest allies the Old School has had in its efforts to secure the adoption of the examining board plan of control of the profession. Dr. Paine's zeal and enthusiasm in this direction has caused his course to be looked upon with very much of disfavor by many of his colleagues throughout the country, who fail not to recognize, however, the really worthy and many good qualities of the good doctor. Two or three years ago it seemed to be necessary that he should not be reappointed a member of the Legislative Committee of the American Institute of Homeopathy, and now it seems he has been left out of the legislative councils of his own State society. It is to be regretted that Dr. Paine's unwillingness to see any merit in the position occupied by others has made this action necessary, for his earnestness in all work he may have had in hand, his enthusiastic devotion to the general interests of our school, and the multitudinous labors he has performed in the line of medical legislation, have excited the admiration of friends and foes alike. While we feel that it is well for our cause that Dr. Paine has been retired we can but sympathize with him deeply in the fact that his retirement has seemed to have been found necessary.

A GALAXY OF HOMEOPATHY'S GYNECOLOGISTS.

Number One.

J. W. WARD, M. D.
J. H. MCCLELLAND, M. D.
O. S. RUNNELLS, M. D.

J. C. WOOD, M. D.
R. LUDLAM, M. D.

J. M. LEE, M. D.
J. W. STREETER, M. D.
E. H. PRATT, M. D.